

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Allstate Insurance Company PAC

ADDRESS (number and street) ▼

2775 Sanders Road Suite A2W

☐ Check if different than previously reported. (ACC)

Northbrook

IL

60062

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00040253

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

06

01

2015

06

30

2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mario Rizzo

Signature of Treasurer

Mario Rizzo

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

07

15

2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
06 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		36833.08
(b) Cash on Hand at Beginning of Reporting Period.....	66146.88	
(c) Total Receipts (from Line 19)	20982.63	137011.37
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	87129.51	173844.45
7. Total Disbursements (from Line 31)	19605.99	106320.93
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67523.52	67523.52
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Allstate Insurance Company PAC

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
06 01 2015

To:

M M / D D / Y Y Y Y Y
06 30 2015
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

19408.84

84006.52

(ii) Unitemized

1573.79

53004.85

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

20982.63

137011.37

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

20982.63

137011.37

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

20982.63

137011.37

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

20982.63

137011.37

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	105.99	660.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	105.99	660.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19500.00	99000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	6660.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	19605.99	106320.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	19605.99	106320.93

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	20982.63	137011.37
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	20982.63	137011.37
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	105.99	660.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	105.99	660.93

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.50

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254792

Amount of Each Receipt this Period

26.18

Full Name (Last, First, Middle Initial)

B. REBECCA A ABEL

Mailing Address 657 CORAL COURT

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.68

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353400

Amount of Each Receipt this Period

26.18

Full Name (Last, First, Middle Initial)

C. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City

COLLEYVILLE

State

TX

Zip Code

76034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.36

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254734

Amount of Each Receipt this Period

16.84

SUBTOTAL of Receipts This Page (optional)..... ►

69.20

TOTAL This Period (last page this line number only)..... ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SA11AI

Transaction ID :

Please note that the PAC is aware that we follow an alternate method of itemizing payroll receipts rather than the suggested manner of disclosing a single total for the reporting period along with the amount deducted per pay period. Because the amounts collected per pay period may change often during the time covered by a single report, we find that reporting individual deductions separately more accurately discloses how the receipts are collected.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL W AGAR

Mailing Address 200 W MILL VALLEY DR

City State Zip Code
 COLLEYVILLE TX 76034

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Service Manager-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.20

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353342

Amount of Each Receipt this Period

16.84

Full Name (Last, First, Middle Initial)

B. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.30

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254571

Amount of Each Receipt this Period

23.55

Full Name (Last, First, Middle Initial)

C. DENIS BAILEY

Mailing Address 8316 E. Tailfeather Dr

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.85

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353178

Amount of Each Receipt this Period

23.55

SUBTOTAL of Receipts This Page (optional)..... ►

63.94

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 9 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City	State	Zip Code
Chicago	IL	60626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

407.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254738

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

B. ALEXANDRA BALATSOUKAS

Mailing Address 1225 W. Morse Unit 508

City	State	Zip Code
Chicago	IL	60626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

442.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353346

Amount of Each Receipt this Period

34.36

Full Name (Last, First, Middle Initial)

C. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City	State	Zip Code
Hawthorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.37

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254609

Amount of Each Receipt this Period

40.16

SUBTOTAL of Receipts This Page (optional)..... ►

108.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM P BALLINGER

Mailing Address 61 Tournament Dr N

City State Zip Code
Hawthorn Woods IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Chief Underwriter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.53

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353217

Amount of Each Receipt this Period

40.16

Full Name (Last, First, Middle Initial)

B. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254635

Amount of Each Receipt this Period

43.90

Full Name (Last, First, Middle Initial)

C. PHILLIP W BANET

Mailing Address 4589 JADE LANE

City State Zip Code
HOFFMAN ESTATES IL 60192

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

563.10

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353243

Amount of Each Receipt this Period

43.90

SUBTOTAL of Receipts This Page (optional)..... ►

127.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.21

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254583

Amount of Each Receipt this Period

30.63

Full Name (Last, First, Middle Initial)

B. ROBERT K BECKER

Mailing Address 5 Greensview Lane

City

Scotch Plains

State

NJ

Zip Code

07076

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.84

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353191

Amount of Each Receipt this Period

30.63

Full Name (Last, First, Middle Initial)

C. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City

Arlington Heights

State

IL

Zip Code

60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting Research-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.70

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254664

Amount of Each Receipt this Period

23.31

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

84.57

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 170

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DIANE BELLAS

Mailing Address 1402 N. Illinois Avenue

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting Research-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.01

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353272

Amount of Each Receipt this Period

23.31

Full Name (Last, First, Middle Initial)

B. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City	State	Zip Code
NAPERVILLE	IL	60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Architect-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

451.23

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254705

Amount of Each Receipt this Period

37.88

Full Name (Last, First, Middle Initial)

C. WALTER A BERKOWICZ

Mailing Address 405 GATESHEAD DRIVE

City	State	Zip Code
NAPERVILLE	IL	60565

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Architect-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

489.11

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353313

Amount of Each Receipt this Period

37.88

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

99.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLN

State Zip Code
NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.74

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254707

Amount of Each Receipt this Period

20.45

Full Name (Last, First, Middle Initial)

B. ROBERT W BIRMAN

Mailing Address 7533 WHITLOCK PLACE

City
LINCOLN

State Zip Code
NE 68516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.19

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353315

Amount of Each Receipt this Period

20.45

Full Name (Last, First, Middle Initial)

C. SUSAN F BOMBECK

Mailing Address 506 Blackhawk Ct

City
Loomis

State Zip Code
CA 95650

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.12

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353401

Amount of Each Receipt this Period

16.85

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.75

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City State Zip Code
 Yucaipa CA 92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

401.88

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254788

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

B. DOUGLAS L BORG

Mailing Address 11988 Crafton Hills Crt

City State Zip Code
 Yucaipa CA 92399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Financial Sales Consultan

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.37

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353396

Amount of Each Receipt this Period

33.49

Full Name (Last, First, Middle Initial)

C. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
 ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.97

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254663

Amount of Each Receipt this Period

32.60

SUBTOTAL of Receipts This Page (optional)..... ►

99.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM B BORST

Mailing Address 827 N. HADDOW AVENUE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Head of Strategic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.57

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353271

Amount of Each Receipt this Period

32.60

Full Name (Last, First, Middle Initial)

B. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.47

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254772

Amount of Each Receipt this Period

17.50

Full Name (Last, First, Middle Initial)

C. GWEN K BOWN

Mailing Address 5220 SAWGRASS DR.

City State Zip Code
LINCOLN NE 68526

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.97

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353380

Amount of Each Receipt this Period

17.50

SUBTOTAL of Receipts This Page (optional)..... ►

67.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 16 OF 170

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City	State	Zip Code
Aurora	CO	80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254777

Amount of Each Receipt this Period

43.29

Full Name (Last, First, Middle Initial)

B. LONDON B BRADLEY

Mailing Address 6350 S Langdale Way

City	State	Zip Code
Aurora	CO	80016

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

522.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353385

Amount of Each Receipt this Period

43.29

Full Name (Last, First, Middle Initial)

C. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City	State	Zip Code
GRAYSLAKE	IL	60030

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

261.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254604

Amount of Each Receipt this Period

21.84

SUBTOTAL of Receipts This Page (optional)..... ►

108.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DUDLEY R BRIGHT

Mailing Address 18135 W MEANDER DR

City State Zip Code
 GRAYSLAKE IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.86

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353212

Amount of Each Receipt this Period

21.84

Full Name (Last, First, Middle Initial)

B. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.93

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254668

Amount of Each Receipt this Period

55.57

Full Name (Last, First, Middle Initial)

C. SHAWN L BROADFIELD

Mailing Address 1044 APPLE BLOSSOM COURT

City State Zip Code
 LAKE ZURICH IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Technical E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

713.50

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353276

Amount of Each Receipt this Period

55.57

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

132.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.72

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254730

Amount of Each Receipt this Period

21.63

Full Name (Last, First, Middle Initial)

B. PAMELA S BROWN

Mailing Address 5886 TEAL LANE

City

LONG GROVE

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Investment Attorney-T

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.35

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353338

Amount of Each Receipt this Period

21.63

Full Name (Last, First, Middle Initial)

C. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City

WINFIELD

State

IL

Zip Code

60190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.21

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254722

Amount of Each Receipt this Period

18.78

SUBTOTAL of Receipts This Page (optional)..... ►

62.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN E BUCHANAN

Mailing Address 26 W. 690 LINDSEY AVE.

City
WINFIELD

State Zip Code
IL 60190

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.99

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353330

Amount of Each Receipt this Period

18.78

Full Name (Last, First, Middle Initial)

B. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City
Antioch

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

203.67

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254666

Amount of Each Receipt this Period

17.10

Full Name (Last, First, Middle Initial)

C. MARK L BUKOWY

Mailing Address 1077 Devon Drive

City
Antioch

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.77

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353274

Amount of Each Receipt this Period

17.10

SUBTOTAL of Receipts This Page (optional)..... ►

52.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 20 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.58

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254601

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

B. TYRONE A BURNO

Mailing Address 868 CHARLTON ROAD

City	State	Zip Code
LAKE VILLA	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Workforce Relations-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.63

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353209

Amount of Each Receipt this Period

18.05

Full Name (Last, First, Middle Initial)

C. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

717.45

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254597

Amount of Each Receipt this Period

60.35

SUBTOTAL of Receipts This Page (optional)..... ►

96.45

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 21 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY C BURNS

Mailing Address 2000 N. BROADMOOR LANE

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-HR-Client Partnership

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353205

Amount of Each Receipt this Period

60.35

Full Name (Last, First, Middle Initial)

B. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City	State	Zip Code
PLEASANT PRAIRI	WI	53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1117.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254751

Amount of Each Receipt this Period

94.81

Full Name (Last, First, Middle Initial)

C. ALICE M BYRNE

Mailing Address 4121 109TH STREET

City	State	Zip Code
PLEASANT PRAIRI	WI	53158

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1212.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353359

Amount of Each Receipt this Period

94.81

SUBTOTAL of Receipts This Page (optional)..... ►

249.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City State Zip Code
 Naperville IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Investment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

327.66

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254825

Amount of Each Receipt this Period

27.80

Full Name (Last, First, Middle Initial)

B. Alfredo M Cantoral

Mailing Address 1960 Clyde Dr

City State Zip Code
 Naperville IL 60565

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Investment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.46

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353435

Amount of Each Receipt this Period

27.80

Full Name (Last, First, Middle Initial)

C. Michael Capuzzi

Mailing Address 2630 W. Winona Street

City State Zip Code
 Chicago IL 60625

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-CLM-Regional Claims E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.99

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254840

Amount of Each Receipt this Period

41.54

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

97.14

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Michael Capuzzi

Mailing Address 2630 W. Winona Street

City	State	Zip Code
Chicago	IL	60625

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Regional Claims E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353450

Amount of Each Receipt this Period

41.54

Full Name (Last, First, Middle Initial)

B. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254710

Amount of Each Receipt this Period

22.13

Full Name (Last, First, Middle Initial)

C. VIRGINIA O CHIAPPETTA

Mailing Address 165 ARLINGTON AVE

City	State	Zip Code
ELMHURST	IL	60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Communications-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353318

Amount of Each Receipt this Period

22.13

SUBTOTAL of Receipts This Page (optional)..... ►

85.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN L CLARK

Mailing Address 257 Lake Circle

City
MADISON

State Zip Code
MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.27

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254759

Amount of Each Receipt this Period

19.94

Full Name (Last, First, Middle Initial)

B. BRIAN L CLARK

Mailing Address 257 Lake Circle

City
MADISON

State Zip Code
MS 39110

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-CAT Finance & Resp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.21

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353367

Amount of Each Receipt this Period

19.94

Full Name (Last, First, Middle Initial)

C. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City
Brentwood

State Zip Code
TN 37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.46

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254715

Amount of Each Receipt this Period

32.00

SUBTOTAL of Receipts This Page (optional)..... ►

71.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 25 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWARD T CLARK

Mailing Address 9484 Ashford Place

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.46

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353323

Amount of Each Receipt this Period

32.00

Full Name (Last, First, Middle Initial)

B. KELLY A CLARK

Mailing Address 258 FOXFORD DR

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.27

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254737

Amount of Each Receipt this Period

20.61

Full Name (Last, First, Middle Initial)

C. KELLY A CLARK

Mailing Address 258 FOXFORD DR

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.88

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353345

Amount of Each Receipt this Period

20.61

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

73.22

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City

ELK GROVE

State

CA

Zip Code

95757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

447.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254807

Amount of Each Receipt this Period

37.55

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER W CLAY

Mailing Address 9832 Toscano Drive

City

ELK GROVE

State

CA

Zip Code

95757

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

485.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353415

Amount of Each Receipt this Period

37.55

Full Name (Last, First, Middle Initial)

C. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City

PALM HARBOR

State

FL

Zip Code

34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254713

Amount of Each Receipt this Period

34.75

SUBTOTAL of Receipts This Page (optional)..... ►

109.85

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH L CLOUSER

Mailing Address 4667 TAMWORTH DR

City

PALM HARBOR

State

FL

Zip Code

34685

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional Field-Sr Mg

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

445.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353321

Amount of Each Receipt this Period

34.75

Full Name (Last, First, Middle Initial)

B. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

469.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254691

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

C. LISA D COCHRANE

Mailing Address 270 FAIRVIEW AVENUE

City

WINNETKA

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-MRK-Integrated Mrktng

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

508.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353299

Amount of Each Receipt this Period

39.13

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

113.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.52

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254616

Amount of Each Receipt this Period

17.47

Full Name (Last, First, Middle Initial)

B. PATRICK E COCHRANE

Mailing Address 6911 Brimstone Lane

City State Zip Code
 Fairfax Station VA 22039

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.99

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353224

Amount of Each Receipt this Period

17.47

Full Name (Last, First, Middle Initial)

C. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City State Zip Code
 KILDEER IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.02

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254694

Amount of Each Receipt this Period

36.72

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

71.66

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 29 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA A COFFEY

Mailing Address 21200 W. KEPWICK

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Delivery & Risk M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.74

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353302

Amount of Each Receipt this Period

36.72

Full Name (Last, First, Middle Initial)

B. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

636.69

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254660

Amount of Each Receipt this Period

53.74

Full Name (Last, First, Middle Initial)

C. EDWARD T COLLINS

Mailing Address 809 DUNHILL COURT

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Public Policy Deve

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.43

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353268

Amount of Each Receipt this Period

53.74

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

144.20

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

259.55

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254681

Amount of Each Receipt this Period

21.79

Full Name (Last, First, Middle Initial)

B. LARRY K CONLEE

Mailing Address 363 Kensington Ct.

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

281.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353289

Amount of Each Receipt this Period

21.79

Full Name (Last, First, Middle Initial)

C. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City

GREEN OAKS

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Group CIO Persona

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

842.74

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254569

Amount of Each Receipt this Period

70.75

SUBTOTAL of Receipts This Page (optional)..... ►

114.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PETER T CORRIGAN

Mailing Address 28852 FOREST LAKE LANE

City	State	Zip Code
GREEN OAKS	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Group CIO Persona

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

913.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353176

Amount of Each Receipt this Period

70.75

Full Name (Last, First, Middle Initial)

B. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254696

Amount of Each Receipt this Period

19.37

Full Name (Last, First, Middle Initial)

C. ERROL CRAMER

Mailing Address 1111 SARANAC AVE.

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Chief Actuary

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.77

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353304

Amount of Each Receipt this Period

19.37

SUBTOTAL of Receipts This Page (optional)..... ►

109.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Teresa J Dalenta

Mailing Address 528 Cumnor Court

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

444.18

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254834

Amount of Each Receipt this Period

40.38

Full Name (Last, First, Middle Initial)

B. Teresa J Dalenta

Mailing Address 528 Cumnor Court

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-PRD-Product Line Mana

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

484.56

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353444

Amount of Each Receipt this Period

40.38

Full Name (Last, First, Middle Initial)

C. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

231.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254623

Amount of Each Receipt this Period

19.60

SUBTOTAL of Receipts This Page (optional)..... ►

100.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 33 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A DAVISON

Mailing Address 2104 Butternut Ln

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Sr M

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.11

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353231

Amount of Each Receipt this Period

19.60

Full Name (Last, First, Middle Initial)

B. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Agency Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.85

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254661

Amount of Each Receipt this Period

47.93

Full Name (Last, First, Middle Initial)

C. RANDALL S DECOURSEY

Mailing Address 1954 Oakwood Dr

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Agency Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.78

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353269

Amount of Each Receipt this Period

47.93

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

115.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

PAGE 34 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

699.22

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254726

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

B. JEFFREY F DEIGL

Mailing Address 453 PRAIRIE

City

ELMHURST

State

IL

Zip Code

60126

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

758.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353334

Amount of Each Receipt this Period

58.91

Full Name (Last, First, Middle Initial)

C. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

279.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254708

Amount of Each Receipt this Period

23.50

SUBTOTAL of Receipts This Page (optional)..... ►

141.32

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 170

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DEIDRE B DERRIG

Mailing Address 460 TOWER ROAD

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353316

Amount of Each Receipt this Period

23.50

Full Name (Last, First, Middle Initial)

B. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City	State	Zip Code
BARRINGTON HILLS	IL	60102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.58

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254752

Amount of Each Receipt this Period

22.27

Full Name (Last, First, Middle Initial)

C. Kristine DiGirolamo

Mailing Address 10123 NORTH RIVER ROAD

City	State	Zip Code
BARRINGTON HILLS	IL	60102

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353360

Amount of Each Receipt this Period

22.27

SUBTOTAL of Receipts This Page (optional)..... ►

68.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 36 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City

Northfield

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.89

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254810

Amount of Each Receipt this Period

68.14

Full Name (Last, First, Middle Initial)

B. Victoria A Dinges

Mailing Address 421 Chapel Hill Lane

City

Northfield

State

IL

Zip Code

60093

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Ent. Social Resp.

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.03

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353419

Amount of Each Receipt this Period

68.14

Full Name (Last, First, Middle Initial)

C. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City

Lincolnwood

State

IL

Zip Code

60712

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

263.12

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254769

Amount of Each Receipt this Period

22.05

SUBTOTAL of Receipts This Page (optional)..... ►

158.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRIAN M DONLAN

Mailing Address 3806 W. Devon Ave

City State Zip Code
Lincolnwood IL 60712

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company PO-Actuary-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.17

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353377

Amount of Each Receipt this Period

22.05

Full Name (Last, First, Middle Initial)

B. Heather C Dougherty

Mailing Address 12 Laurel Street

City State Zip Code
Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.51

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254806

Amount of Each Receipt this Period

18.75

Full Name (Last, First, Middle Initial)

c. Heather C Dougherty

Mailing Address 12 Laurel Street

City State Zip Code
Rye NY 10580

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353414

Amount of Each Receipt this Period

18.75

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

59.55

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 38 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Contact Center Strateg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.24

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254649

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

B. PATRICIA B DREXLER

Mailing Address 472 W. SYCAMORE ST.

City	State	Zip Code
VERNON HILLS	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Contact Center Strateg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

488.23

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353257

Amount of Each Receipt this Period

37.99

Full Name (Last, First, Middle Initial)

C. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.33

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254811

Amount of Each Receipt this Period

37.08

SUBTOTAL of Receipts This Page (optional)..... ►

113.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 39 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stacy Drumtra

Mailing Address 114 E. Euclid Ave

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Corporate Comm-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.41

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353420

Amount of Each Receipt this Period

37.08

Full Name (Last, First, Middle Initial)

B. SUSAN DUCHAK

Mailing Address 4815 HIGHLAND AVE.

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.51

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353411

Amount of Each Receipt this Period

16.10

Full Name (Last, First, Middle Initial)

C. DONALD L DUFF

Mailing Address 2 Washington Ct..

City	State	Zip Code
STREAMWOOD	IL	60107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

438.93

Date of Receipt

M M	/	D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : A2015-1254647

Amount of Each Receipt this Period

39.13

SUBTOTAL of Receipts This Page (optional)..... ►

92.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DONALD L DUFF

Mailing Address 2 Washington Ct..

City State Zip Code
 STREAMWOOD IL 60107

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ABI-Product Line-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353255

Amount of Each Receipt this Period

39.13

Full Name (Last, First, Middle Initial)

B. Pamela N Dufour

Mailing Address 1804 Aberdeen Drive

City State Zip Code
 Glenview IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-B2B-President-ALL Roa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254845

Amount of Each Receipt this Period

32.31

Full Name (Last, First, Middle Initial)

C. Pamela N Dufour

Mailing Address 1804 Aberdeen Drive

City State Zip Code
 Glenview IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-B2B-President-ALL Roa

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.09

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353455

Amount of Each Receipt this Period

32.31

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

103.75

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City
ROSCOEState
ILZip Code
61073FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Project Mgmt-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

356.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254701

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

B. MICHAEL S DUNN

Mailing Address 18202 HARNISH RD.

City
ROSCOEState
ILZip Code
61073FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Project Mgmt-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353309

Amount of Each Receipt this Period

30.05

Full Name (Last, First, Middle Initial)

C. JEFFREY P DWYER

Mailing Address 44 CHAMPLAIN COURT

City
MANAHAWKINState
NJZip Code
08050FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353175

Amount of Each Receipt this Period

16.62

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

76.72

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City	State	Zip Code
Chicago	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

995.88

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	1	5

Transaction ID : A2015-1254826

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

B. Thomas V Ealy

Mailing Address 2601 N. Greenview Ave.

City	State	Zip Code
Chicago	IL	60614

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Encomp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1078.87

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	1	5

Transaction ID : A2015-1353436

Amount of Each Receipt this Period

82.99

Full Name (Last, First, Middle Initial)

C. Miguel Edwards

Mailing Address 21 Seneca Ave West

City	State	Zip Code
Hathorn Woods	IL	60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AIA-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.48

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	1	5

Transaction ID : A2015-1254837

Amount of Each Receipt this Period

46.13

SUBTOTAL of Receipts This Page (optional)..... ►

212.11

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Miguel Edwards

Mailing Address 21 Seneca Ave West

City	State	Zip Code
Hathorn Woods	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AIA-Operations

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353447

Amount of Each Receipt this Period

46.13

Full Name (Last, First, Middle Initial)

B. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City	State	Zip Code
CHICAGO	IL	60655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

646.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254718

Amount of Each Receipt this Period

53.85

Full Name (Last, First, Middle Initial)

C. KATHLEEN N ENRIGHT

Mailing Address 10323 TRUMBULL AVE

City	State	Zip Code
CHICAGO	IL	60655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Accounting

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353326

Amount of Each Receipt this Period

53.85

SUBTOTAL of Receipts This Page (optional)..... ►

153.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.27

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254578

Amount of Each Receipt this Period

20.57

Full Name (Last, First, Middle Initial)

B. JAN B EPSTEIN

Mailing Address 2975 ROSLYN LANE

City State Zip Code
 BUFFALO GROVE IL 60089

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 CR-Philanthropy-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.84

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353186

Amount of Each Receipt this Period

20.57

Full Name (Last, First, Middle Initial)

C. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City State Zip Code
 INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Allstate Insurance Company

Occupation
 VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

713.10

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254572

Amount of Each Receipt this Period

59.77

SUBTOTAL of Receipts This Page (optional)..... ►

100.91

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 45 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL L ESCOBAR

Mailing Address 660 BALMORAL LANE

City	State	Zip Code
INVERNESS	IL	60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Diversity & Org. Ef

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

772.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353179

Amount of Each Receipt this Period

59.77

Full Name (Last, First, Middle Initial)

B. Marcus W Ferguson

Mailing Address 818 S. Mitchell Ave.

City	State	Zip Code
Arlington Heights	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.25

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254843

Amount of Each Receipt this Period

30.30

Full Name (Last, First, Middle Initial)

C. Marcus W Ferguson

Mailing Address 818 S. Mitchell Ave.

City	State	Zip Code
Arlington Heights	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353453

Amount of Each Receipt this Period

30.30

SUBTOTAL of Receipts This Page (optional)..... ►

120.37

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State Zip Code
IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

395.34

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254741

Amount of Each Receipt this Period

33.32

Full Name (Last, First, Middle Initial)

B. CAROLYN A FILIPOVIC

Mailing Address 918 JUNIPER ROAD

City
GLENVIEW

State Zip Code
IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-EthicsComplPriv-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.66

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353349

Amount of Each Receipt this Period

33.32

Full Name (Last, First, Middle Initial)

C. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City
ANTIOCH

State Zip Code
IL 60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.79

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254595

Amount of Each Receipt this Period

29.03

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

95.67

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 47 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN FINE

Mailing Address 40375 N. SEA EAGLE CT

City	State	Zip Code
ANTIOCH	IL	60002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.82

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353203

Amount of Each Receipt this Period

29.03

Full Name (Last, First, Middle Initial)

B. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254771

Amount of Each Receipt this Period

55.96

Full Name (Last, First, Middle Initial)

C. ANGELA K FONTANA

Mailing Address 1280 WILD ROSE LANE

City	State	Zip Code
LAKE FOREST	IL	60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Allstate Financial

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

722.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353379

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

142.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 170
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SARA A FOSTER

Mailing Address 2216 BARRETT DR

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Six Sigma-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.83

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254680

Amount of Each Receipt this Period

37.32

Full Name (Last, First, Middle Initial)

B. SARA A FOSTER

Mailing Address 2216 BARRETT DR

City State Zip Code
ALGONQUIN IL 60102

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Six Sigma-Sr Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.15

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353288

Amount of Each Receipt this Period

37.32

Full Name (Last, First, Middle Initial)

C. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254570

Amount of Each Receipt this Period

28.50

SUBTOTAL of Receipts This Page (optional)..... ►

103.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. VINCENT A FUSCO

Mailing Address 6 SUGAR MAPLE COURT

City State Zip Code
DIX HILLS NY 11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353177

Amount of Each Receipt this Period

28.50

Full Name (Last, First, Middle Initial)

B. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Operations-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.28

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254644

Amount of Each Receipt this Period

18.32

Full Name (Last, First, Middle Initial)

C. ANNA M GALL

Mailing Address 1667 FLAGSTONE DRIVE

City State Zip Code
CRYSTAL LAKE IL 60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Operations-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.60

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353252

Amount of Each Receipt this Period

18.32

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

65.14

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

498.84

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254686

Amount of Each Receipt this Period

42.05

Full Name (Last, First, Middle Initial)

B. NICK GEORGAKOPOULOS

Mailing Address 1129 N Mitchell Ave

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.89

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353294

Amount of Each Receipt this Period

42.05

Full Name (Last, First, Middle Initial)

C. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
HOFFMAN ESTATES IL 60169

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.74

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254773

Amount of Each Receipt this Period

34.88

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

118.98

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BONNIE S GILL

Mailing Address 1570 EDGEFIELD LANE

City State Zip Code
 HOFFMAN ESTATES IL 60169

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.62

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353381

Amount of Each Receipt this Period

34.88

Full Name (Last, First, Middle Initial)

B. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.94

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254573

Amount of Each Receipt this Period

47.01

Full Name (Last, First, Middle Initial)

C. JOAN M GILMORE

Mailing Address 656 S BUCKINGHAM CT

City State Zip Code
 LAKE FOREST IL 60045

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.95

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353180

Amount of Each Receipt this Period

47.01

SUBTOTAL of Receipts This Page (optional)..... ►

128.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City State Zip Code
Roswell GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

283.14

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254574

Amount of Each Receipt this Period

23.94

Full Name (Last, First, Middle Initial)

B. WILLIAM T GOFF

Mailing Address 310 Plantation Way

City State Zip Code
Roswell GA 30075

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Field Vice Preside

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.08

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353181

Amount of Each Receipt this Period

23.94

Full Name (Last, First, Middle Initial)

C. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City State Zip Code
HAWTHORN WOODS IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.09

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254653

Amount of Each Receipt this Period

23.05

SUBTOTAL of Receipts This Page (optional)..... ►

70.93

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 53 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRUCE R GOLDBERG

Mailing Address 10 MULBERRY LN

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353261

Amount of Each Receipt this Period

23.05

Full Name (Last, First, Middle Initial)

B. RICHARD M GOLICK

Mailing Address 2372 SIMPSON FARM WAY

City	State	Zip Code
SMYRNA	GA	30080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254797

Amount of Each Receipt this Period

43.69

Full Name (Last, First, Middle Initial)

C. RICHARD M GOLICK

Mailing Address 2372 SIMPSON FARM WAY

City	State	Zip Code
SMYRNA	GA	30080

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

564.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353405

Amount of Each Receipt this Period

43.69

SUBTOTAL of Receipts This Page (optional)..... ►

110.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.32

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254794

Amount of Each Receipt this Period

37.30

Full Name (Last, First, Middle Initial)

B. ANN A GOULD

Mailing Address 4071 NEWPORT LANE

City State Zip Code
ARLINGTON HTS IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

481.62

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353402

Amount of Each Receipt this Period

37.30

Full Name (Last, First, Middle Initial)

C. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City State Zip Code
Arlington Heights IL 60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Staff & Retained

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

670.31

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254625

Amount of Each Receipt this Period

56.50

SUBTOTAL of Receipts This Page (optional)..... ►

131.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 55 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GEORGE F GRAWE

Mailing Address 801 N. Vail Avenue

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Staff & Retained

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

726.81

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353233

Amount of Each Receipt this Period

56.50

Full Name (Last, First, Middle Initial)

B. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City	State	Zip Code
Lindenhurst	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-RMBC Underwriting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254614

Amount of Each Receipt this Period

20.79

Full Name (Last, First, Middle Initial)

C. KELLIE H GREEN

Mailing Address 150 Meadowlark Circle

City	State	Zip Code
Lindenhurst	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-RMBC Underwriting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

266.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353222

Amount of Each Receipt this Period

20.79

SUBTOTAL of Receipts This Page (optional)..... ►

98.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
 Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

808.37

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254818

Amount of Each Receipt this Period

68.35

Full Name (Last, First, Middle Initial)

B. Mark A Green

Mailing Address 1711 Wildwood Ct

City State Zip Code
 Glenview IL 60025

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Ivanta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

876.72

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353428

Amount of Each Receipt this Period

68.35

Full Name (Last, First, Middle Initial)

C. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
 OAK PARK IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.67

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254633

Amount of Each Receipt this Period

80.77

SUBTOTAL of Receipts This Page (optional)..... ►

217.47

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JUDITH P GREFFIN

Mailing Address 338 North Kenilworth

City State Zip Code
OAK PARK IL 60302

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-INV-Chief Investment

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1034.44

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2015

Transaction ID : A2015-1353241

Amount of Each Receipt this Period

80.77

Full Name (Last, First, Middle Initial)

B. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City State Zip Code
Lake Zurich IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

531.05

Date of Receipt

M M / D D / Y Y Y Y Y
06 12 2015

Transaction ID : A2015-1254798

Amount of Each Receipt this Period

45.06

Full Name (Last, First, Middle Initial)

C. M'BA G GREGOIRE

Mailing Address 35 Linden Road

City State Zip Code
Lake Zurich IL 60047

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney HO-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

576.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 26 2015

Transaction ID : A2015-1353406

Amount of Each Receipt this Period

45.06

SUBTOTAL of Receipts This Page (optional)..... ►

170.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER:
 (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City	State	Zip Code
WESTBURY	NY	11590

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.47

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254585

Amount of Each Receipt this Period

19.59

Full Name (Last, First, Middle Initial)

B. MARYLIN H GROOM

Mailing Address 170 ASPINWALL STREET

City	State	Zip Code
WESTBURY	NY	11590

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353193

Amount of Each Receipt this Period

19.59

Full Name (Last, First, Middle Initial)

C. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City	State	Zip Code
Ponte Vedra Beach	FL	32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

414.45

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254740

Amount of Each Receipt this Period

35.04

SUBTOTAL of Receipts This Page (optional)..... ▶

74.22

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 59 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J GUIDOS

Mailing Address 6130 St. Andrews Ct.

City	State	Zip Code
Ponte Vedra Beach	FL	32082

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-B2B-President Allsta

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

449.49

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353348

Amount of Each Receipt this Period

35.04

Full Name (Last, First, Middle Initial)

B. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City	State	Zip Code
Northbrook	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.30

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254838

Amount of Each Receipt this Period

66.35

Full Name (Last, First, Middle Initial)

C. Sanjay Gupta

Mailing Address 1971 Farnsworth Ln

City	State	Zip Code
Northbrook	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-Mktg Innovation & Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353448

Amount of Each Receipt this Period

66.35

SUBTOTAL of Receipts This Page (optional)..... ►

167.74

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.95

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254717

Amount of Each Receipt this Period

18.54

Full Name (Last, First, Middle Initial)

B. ROBERT R HALPERN-GIVENS

Mailing Address 3001 SUTTON WOODS CT

City

CRYSTAL LAKE

State

IL

Zip Code

60012

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Payroll & Relocation-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.49

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353325

Amount of Each Receipt this Period

18.54

Full Name (Last, First, Middle Initial)

C. RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.88

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254778

Amount of Each Receipt this Period

43.45

SUBTOTAL of Receipts This Page (optional)..... ►

80.53

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RANDALL M HANSON

Mailing Address 840 ALLEGHANY

City
GRAYSLAKE

State Zip Code
IL 60030

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
Claims-HO Leadership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

557.33

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353386

Amount of Each Receipt this Period

43.45

Full Name (Last, First, Middle Initial)

B. David S Harper

Mailing Address 41 Lancaster Lane

City
Lincolnshire

State Zip Code
IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

821.55

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254821

Amount of Each Receipt this Period

69.22

Full Name (Last, First, Middle Initial)

c. David S Harper

Mailing Address 41 Lancaster Lane

City
Lincolnshire

State Zip Code
IL 60069

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
SVP-FSS-Tax

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

890.77

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353431

Amount of Each Receipt this Period

69.22

SUBTOTAL of Receipts This Page (optional)..... ►

181.89

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 62 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

786.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254833

Amount of Each Receipt this Period

66.12

Full Name (Last, First, Middle Initial)

B. Cheryl A Harris

Mailing Address 4136 Three Lakes Drive

City State Zip Code
 Long Grove IL 60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Sourcing & Procur

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

852.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353443

Amount of Each Receipt this Period

66.12

Full Name (Last, First, Middle Initial)

C. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code
 Chicago IL 60642

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional HO-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.22

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254813

Amount of Each Receipt this Period

19.26

SUBTOTAL of Receipts This Page (optional)..... ►

151.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jacqueline J Hart

Mailing Address 1431 W. Walton

City State Zip Code
 Chicago IL 60642

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Mktg-Regional HO-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.48

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353422

Amount of Each Receipt this Period

19.26

Full Name (Last, First, Middle Initial)

B. James A Haskins

Mailing Address 511 Oak Knoll Road

City State Zip Code
 Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Allstate Brand Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1230.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254835

Amount of Each Receipt this Period

103.85

Full Name (Last, First, Middle Initial)

C. James A Haskins

Mailing Address 511 Oak Knoll Road

City State Zip Code
 Barrington IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Allstate Brand Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1334.44

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353445

Amount of Each Receipt this Period

103.85

SUBTOTAL of Receipts This Page (optional)..... ►

226.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code
 Ponte Vedra FL 32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Allstate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.97

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254631

Amount of Each Receipt this Period

40.21

Full Name (Last, First, Middle Initial)

B. KEITH A HAUSCHILDT

Mailing Address 25 Players Club Villas Rd

City State Zip Code
 Ponte Vedra FL 32082

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-B2B-Allstate Benefits

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

519.18

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353239

Amount of Each Receipt this Period

40.21

Full Name (Last, First, Middle Initial)

C. Troy M Hawkes

Mailing Address 210 Ivy Glen Dr.

City State Zip Code
 Milford MI 48380

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.93

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254841

Amount of Each Receipt this Period

50.77

SUBTOTAL of Receipts This Page (optional)..... ►

131.19

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 65 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Troy M Hawkes

Mailing Address 210 Ivy Glen Dr.

City	State	Zip Code
Milford	MI	48380

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353451

Amount of Each Receipt this Period

50.77

Full Name (Last, First, Middle Initial)

B. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City	State	Zip Code
CASTLE ROCK	CO	80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254589

Amount of Each Receipt this Period

17.94

Full Name (Last, First, Middle Initial)

C. JEFFREY R HEALY

Mailing Address 7452 BERKELEY CIRCLE

City	State	Zip Code
CASTLE ROCK	CO	80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353197

Amount of Each Receipt this Period

17.94

SUBTOTAL of Receipts This Page (optional)..... ►

86.65

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 66 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City	State	Zip Code
Olympia	WA	98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254842

Amount of Each Receipt this Period

34.23

Full Name (Last, First, Middle Initial)

B. Jon E Hedegard

Mailing Address 1314 Rose St. NE

City	State	Zip Code
Olympia	WA	98506

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353452

Amount of Each Receipt this Period

34.23

Full Name (Last, First, Middle Initial)

C. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City	State	Zip Code
BUFFALO GROVE	IL	60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Audit-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254565

Amount of Each Receipt this Period

17.71

SUBTOTAL of Receipts This Page (optional)..... ►

86.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 67 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JASON J HEIGER

Mailing Address 990 INDIAN SPRING LANE

City

BUFFALO GROVE

State

IL

Zip Code

60089

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Audit-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

227.89

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353172

Amount of Each Receipt this Period

17.71

Full Name (Last, First, Middle Initial)

B. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City

BELLWOOD

State

IL

Zip Code

60104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Quality & Compliance-

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

206.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254659

Amount of Each Receipt this Period

17.81

Full Name (Last, First, Middle Initial)

C. EYVONNA HEMPHILL

Mailing Address 337 46TH AVE

City

BELLWOOD

State

IL

Zip Code

60104

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ABI-Quality & Compliance-

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

224.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353267

Amount of Each Receipt this Period

17.81

SUBTOTAL of Receipts This Page (optional)..... ►

53.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City State Zip Code
Wirtz VA 24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254610

Amount of Each Receipt this Period

17.25

Full Name (Last, First, Middle Initial)

B. EDDIE H HILL

Mailing Address 8390 Burnt Chimney Road

City State Zip Code
Wirtz VA 24184

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
ATO-Leader-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353218

Amount of Each Receipt this Period

17.25

Full Name (Last, First, Middle Initial)

C. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City State Zip Code
LINDENHURST IL 60046

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1698.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254615

Amount of Each Receipt this Period

143.89

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

178.39

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 69 OF 170

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM G HILL

Mailing Address 2935 GLENARYE DRIVE

City

LINDENHURST

State

IL

Zip Code

60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Regional Product

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1842.67

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353223

Amount of Each Receipt this Period

143.89

Full Name (Last, First, Middle Initial)

B. SHERYL L HODGES

Mailing Address 2510 OAK AVENUE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Employment Attorney-E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.99

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353298

Amount of Each Receipt this Period

15.67

Full Name (Last, First, Middle Initial)

C. SAM R HOUK

Mailing Address 1158 CIMARRON DR.

City

CARY

State

IL

Zip Code

60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

LPM-Fin Strategic Ops-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.74

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254662

Amount of Each Receipt this Period

32.40

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

191.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SAM R HOUK

Mailing Address 1158 CIMARRON DR.

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

LPM-Fin Strategic Ops-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.14

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353270

Amount of Each Receipt this Period

32.40

Full Name (Last, First, Middle Initial)

B. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City	State	Zip Code
ARLINGTON HTS.	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.95

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254757

Amount of Each Receipt this Period

21.32

Full Name (Last, First, Middle Initial)

C. MARY L HUBER

Mailing Address 1532 NORTH BELMONT AVE.

City	State	Zip Code
ARLINGTON HTS.	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Communications-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.27

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353365

Amount of Each Receipt this Period

21.32

SUBTOTAL of Receipts This Page (optional)..... ►

75.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 71 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ADS-Accounting & Finance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254606

Amount of Each Receipt this Period

23.46

Full Name (Last, First, Middle Initial)

B. MICHAEL S HURLEY

Mailing Address 1225 N. BURGANDY TRAIL

City

JACKSONVILLE

State

FL

Zip Code

32259

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ADS-Accounting & Finance-

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353214

Amount of Each Receipt this Period

23.46

Full Name (Last, First, Middle Initial)

C. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

596.70

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254687

Amount of Each Receipt this Period

60.39

SUBTOTAL of Receipts This Page (optional)..... ►

107.31

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 72 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN L IHM

Mailing Address 21558 W GOLDFINCH CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Corporate Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

657.09

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353295

Amount of Each Receipt this Period

60.39

Full Name (Last, First, Middle Initial)

B. MARIANO A IMBARRATO

Mailing Address 10825 CHAUCER DRIVE

City	State	Zip Code
WILLOW SPRINGS	IL	60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254674

Amount of Each Receipt this Period

52.29

Full Name (Last, First, Middle Initial)

C. MARIANO A IMBARRATO

Mailing Address 10825 CHAUCER DRIVE

City	State	Zip Code
WILLOW SPRINGS	IL	60480

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-AF-Capital Planning &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

668.57

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353282

Amount of Each Receipt this Period

52.29

SUBTOTAL of Receipts This Page (optional)..... ►

164.97

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 73 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-General Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

392.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254665

Amount of Each Receipt this Period

32.95

Full Name (Last, First, Middle Initial)

B. LYNNE A IVERSON

Mailing Address 890 BLAZING STAR TRAIL

City	State	Zip Code
CARY	IL	60013

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO-General Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.43

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353273

Amount of Each Receipt this Period

32.95

Full Name (Last, First, Middle Initial)

C. BOB A JACKSON

Mailing Address 226 Maison Court

City	State	Zip Code
Altamonte Springs	FL	32714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.20

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254781

Amount of Each Receipt this Period

23.85

SUBTOTAL of Receipts This Page (optional)..... ►

89.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 74 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BOB A JACKSON

Mailing Address 226 Maison Court

City	State	Zip Code
Altamonte Springs	FL	32714

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.05

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353389

Amount of Each Receipt this Period

23.85

Full Name (Last, First, Middle Initial)

B. JAMES C JAMIESON

Mailing Address 935 Lancaster Rd..

City	State	Zip Code
Lake Zurich	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

506.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254650

Amount of Each Receipt this Period

42.99

Full Name (Last, First, Middle Initial)

C. JAMES C JAMIESON

Mailing Address 935 Lancaster Rd..

City	State	Zip Code
Lake Zurich	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Real Estate & Constr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

549.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353258

Amount of Each Receipt this Period

42.99

SUBTOTAL of Receipts This Page (optional)..... ►

109.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.20

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254831

Amount of Each Receipt this Period

18.45

Full Name (Last, First, Middle Initial)

B. Jerry A Johnson

Mailing Address 5233 Tree Way Lane South

City State Zip Code
 Jacksonville FL 32258

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.65

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353441

Amount of Each Receipt this Period

18.45

Full Name (Last, First, Middle Initial)

C. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City State Zip Code
 BARRINGTON IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.48

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254744

Amount of Each Receipt this Period

19.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

55.90

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 76 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES W JONSKE

Mailing Address 1217 BARCLAY CIRCLE

City

BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Standard Auto

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

244.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353352

Amount of Each Receipt this Period

19.00

Full Name (Last, First, Middle Initial)

B. JOHN A KANE

Mailing Address 11 Ups N Downs Court

City

Flemington

State

NJ

Zip Code

08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

310.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353184

Amount of Each Receipt this Period

26.24

Full Name (Last, First, Middle Initial)

C. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City

GRAYSLAKE

State

IL

Zip Code

60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Info Risk Mgmt-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

226.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : A2015-1254750

Amount of Each Receipt this Period

19.22

SUBTOTAL of Receipts This Page (optional)..... ►

64.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 77 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY M KATHRENS

Mailing Address 703 HIGHLAND CT

City
GRAYSLAKEState Zip Code
IL 60030FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Info Risk Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.72

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353358

Amount of Each Receipt this Period

19.22

Full Name (Last, First, Middle Initial)

B. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City
Hawthorn WoodsState Zip Code
IL 60047FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Life Ins. & Broke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

701.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254828

Amount of Each Receipt this Period

58.66

Full Name (Last, First, Middle Initial)

C. Wilford J Kavanaugh

Mailing Address 7 Open Parkway North

City
Hawthorn WoodsState Zip Code
IL 60047FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Life Ins. & Broke

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

759.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353438

Amount of Each Receipt this Period

58.66

SUBTOTAL of Receipts This Page (optional)..... ►

136.54

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 78 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Portfolio Mgmt &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

708.21

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254563

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER R KIAH

Mailing Address 221 BRAMPTON LN

City

LAKE FOREST

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Portfolio Mgmt &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

767.29

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353170

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

C. CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City

BARTLETT

State

IL

Zip Code

60103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.14

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254651

Amount of Each Receipt this Period

45.43

SUBTOTAL of Receipts This Page (optional)..... ►

163.59

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 79 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CURTIS L KIBLER

Mailing Address 1332 BAY MEADOWS DR

City	State	Zip Code
BARTLETT	IL	60103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353259

Amount of Each Receipt this Period

45.43

Full Name (Last, First, Middle Initial)

B. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City	State	Zip Code
Lake Villa	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.07

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254608

Amount of Each Receipt this Period

22.37

Full Name (Last, First, Middle Initial)

C. BARBARA L KILROY

Mailing Address 25396 W Columbia Bay Drive

City	State	Zip Code
Lake Villa	IL	60046

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Fin Analysis-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

287.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353216

Amount of Each Receipt this Period

22.37

SUBTOTAL of Receipts This Page (optional)..... ►

90.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 80 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Stephen B King

Mailing Address 1620 Monterey

City	State	Zip Code
Glenview	IL	60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

374.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254816

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

B. Stephen B King

Mailing Address 1620 Monterey

City	State	Zip Code
Glenview	IL	60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-Leadership & Talent

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

405.87

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353426

Amount of Each Receipt this Period

31.38

Full Name (Last, First, Middle Initial)

C. Brian D Klemstein

Mailing Address 608 Haddon Circle

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-AFCO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353421

Amount of Each Receipt this Period

16.66

SUBTOTAL of Receipts This Page (optional)..... ►

79.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANONState Zip Code
PA 17042FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.16

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254600

Amount of Each Receipt this Period

23.47

Full Name (Last, First, Middle Initial)

B. TIMOTHY L KNAPP

Mailing Address 132 FARMSTEAD CIRCLE

City
LEBANONState Zip Code
PA 17042FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.63

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353208

Amount of Each Receipt this Period

23.47

Full Name (Last, First, Middle Initial)

C. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City
NORTHBROOKState Zip Code
IL 60062FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

474.35

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254776

Amount of Each Receipt this Period

40.14

SUBTOTAL of Receipts This Page (optional)..... ►

87.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 82 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY D KNIPP

Mailing Address 2050 GLENDALE AVE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

514.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353384

Amount of Each Receipt this Period

40.14

Full Name (Last, First, Middle Initial)

B. JAIKRISHNA KUCHIMANCHI

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Manager-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

454.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254721

Amount of Each Receipt this Period

38.54

Full Name (Last, First, Middle Initial)

C. JAIKRISHNA KUCHIMANCHI

Mailing Address 4513 Jenna Rd

City

Glenview

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Manager-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

492.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353329

Amount of Each Receipt this Period

38.54

SUBTOTAL of Receipts This Page (optional)..... ►

117.22

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 83 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-APL-Strategic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.85

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015**Transaction ID : A2015-1254621**

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

B. J Wayne W KULLMAN

Mailing Address 2005 Henley St.

City
GLENVIEWState Zip Code
IL 60025FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-APL-Strategic Design

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.07

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015**Transaction ID : A2015-1353229**

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

C. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD NE

City
ATLANTAState Zip Code
GA 30307FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.15

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015**Transaction ID : A2015-1254593**

Amount of Each Receipt this Period

16.98

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

67.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY F LEASENDALE

Mailing Address 422 RIDGECREST RD NE

City State Zip Code
 ATLANTA GA 30307

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353201

Amount of Each Receipt this Period

16.98

Full Name (Last, First, Middle Initial)

B. SUSAN L LEES

Mailing Address 1950 Merritt Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1358.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254561

Amount of Each Receipt this Period

115.38

Full Name (Last, First, Middle Initial)

C. SUSAN L LEES

Mailing Address 1950 Merritt Lane

City State Zip Code
 Lake Forest IL 60045

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company EVP-LGL-Gen'l Counsel & C

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1474.02

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353168

Amount of Each Receipt this Period

115.38

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

247.74

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Peter G Logothesis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

761.20

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254829

Amount of Each Receipt this Period

63.67

Full Name (Last, First, Middle Initial)

B. Peter G Logothesis

Mailing Address 2326 Indian Ridge Drive

City State Zip Code
Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

824.87

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353439

Amount of Each Receipt this Period

63.67

Full Name (Last, First, Middle Initial)

C. ANGELA M Lovest

Mailing Address 29 Tullach Place

City State Zip Code
Stonebrae CA 94542

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.92

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254602

Amount of Each Receipt this Period

29.65

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

156.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA M Lovest

Mailing Address 29 Tullach Place

City State Zip Code
Stonebrae CA 94542

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strategy & Ops-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

439.57

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353210

Amount of Each Receipt this Period

29.65

Full Name (Last, First, Middle Initial)

B. RHONDA J LOWE

Mailing Address 2501 Catocin Court Unit 3A

City State Zip Code
Frederick MD 21702

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.23

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353341

Amount of Each Receipt this Period

16.32

Full Name (Last, First, Middle Initial)

C. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City State Zip Code
GLENDALE CA 91226

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

461.04

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254796

Amount of Each Receipt this Period

39.05

SUBTOTAL of Receipts This Page (optional)..... ►

85.02

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 87 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY J LUCETT

Mailing Address P.O. BOX 9242

City
GLENDALEState Zip Code
CA 91226FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Lit Svcs Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.09

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015**Transaction ID : A2015-1353404**

Amount of Each Receipt this Period

39.05

Full Name (Last, First, Middle Initial)

B. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURGState Zip Code
IL 60193FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.61

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015**Transaction ID : A2015-1254699**

Amount of Each Receipt this Period

23.39

Full Name (Last, First, Middle Initial)

C. COREY C LUECHT

Mailing Address 843 Spring Cove Dr

City
SCHAUMBURGState Zip Code
IL 60193FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SPS-Strategic Alliance-Di

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015**Transaction ID : A2015-1353307**

Amount of Each Receipt this Period

23.39

SUBTOTAL of Receipts This Page (optional)..... ►

85.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 88 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City	State	Zip Code
Skokie	IL	60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.33

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254711

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

B. BENJAMIN E LUMICAO

Mailing Address 9655 Woods Drive Unit 708

City	State	Zip Code
Skokie	IL	60077

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

468.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353319

Amount of Each Receipt this Period

36.23

Full Name (Last, First, Middle Initial)

C. Katherine A Mabe

Mailing Address 2750 Commons Drive

City	State	Zip Code
Glenview	IL	60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-B2B-President Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1386.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254827

Amount of Each Receipt this Period

117.69

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

190.15

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Katherine A Mabe

Mailing Address 2750 Commons Drive

City State Zip Code
 Glenview IL 60026

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-B2B-President Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1504.01

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353437

Amount of Each Receipt this Period

117.69

Full Name (Last, First, Middle Initial)

B. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
 CASTLE ROCK CO 80104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.80

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254756

Amount of Each Receipt this Period

22.90

Full Name (Last, First, Middle Initial)

C. DANIEL J MACDONALD

Mailing Address 2250 RIDGETRAIL DR

City State Zip Code
 CASTLE ROCK CO 80104

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSL - Growth

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.70

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353364

Amount of Each Receipt this Period

22.90

SUBTOTAL of Receipts This Page (optional)..... ►

163.49

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.99

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254658

Amount of Each Receipt this Period

25.31

Full Name (Last, First, Middle Initial)

B. KENNETH P MARCOTTE

Mailing Address 2311 HAVERTON DR

City State Zip Code
 MUNDELEIN IL 60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-INV-Finance

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.30

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353266

Amount of Each Receipt this Period

25.31

Full Name (Last, First, Middle Initial)

C. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City State Zip Code
 McHenry IL 60051

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

505.93

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254640

Amount of Each Receipt this Period

42.63

SUBTOTAL of Receipts This Page (optional)..... ►

93.25

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 91 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Rhonda J Masser

Mailing Address 4807 Wildwood Dr

City	State	Zip Code
McHenry	IL	60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partnership-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

548.56

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353248

Amount of Each Receipt this Period

42.63

Full Name (Last, First, Middle Initial)

B. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City	State	Zip Code
LAKE BLUFF	IL	60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

277.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254712

Amount of Each Receipt this Period

23.27

Full Name (Last, First, Middle Initial)

C. JOHN R MATHEWS

Mailing Address 401 E NORTH AVENUE

City	State	Zip Code
LAKE BLUFF	IL	60044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.71

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353320

Amount of Each Receipt this Period

23.27

SUBTOTAL of Receipts This Page (optional)..... ►

89.17

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 92 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

513.71

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254671

Amount of Each Receipt this Period

42.94

Full Name (Last, First, Middle Initial)

B. JOHN A MC LAUGHLIN

Mailing Address 25748 N. Stoney Kirk Ct.

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

556.65

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353279

Amount of Each Receipt this Period

42.94

Full Name (Last, First, Middle Initial)

C. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.59

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254767

Amount of Each Receipt this Period

16.84

SUBTOTAL of Receipts This Page (optional)..... ►

102.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 93 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LINDA H MCCLELLAN

Mailing Address 5561 Hilltop Lane

City	State	Zip Code
Libertyville	IL	60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353375

Amount of Each Receipt this Period

16.84

Full Name (Last, First, Middle Initial)

B. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254637

Amount of Each Receipt this Period

20.92

Full Name (Last, First, Middle Initial)

C. SCOTT A MCCONNELL

Mailing Address 21722 N TIMBER RIDGE CT

City	State	Zip Code
KILDEER	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

INV-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353245

Amount of Each Receipt this Period

20.92

SUBTOTAL of Receipts This Page (optional)..... ►

58.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 94 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS R MCDONNELL

Mailing Address 1519 Lincoln Street

City

EVANSTON

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254755

Amount of Each Receipt this Period

57.51

Full Name (Last, First, Middle Initial)

B. THOMAS R MCDONNELL

Mailing Address 1519 Lincoln Street

City

EVANSTON

State

IL

Zip Code

60201

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.08

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353363

Amount of Each Receipt this Period

57.51

Full Name (Last, First, Middle Initial)

C. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City

GAINESVILLE

State

VA

Zip Code

20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.98

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254791

Amount of Each Receipt this Period

18.50

SUBTOTAL of Receipts This Page (optional)..... ►

133.52

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 95 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LEE L McElroy

Mailing Address 7808 ROYAL SYDNEY DR

City	State	Zip Code
GAINESVILLE	VA	20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353399

Amount of Each Receipt this Period

18.50

Full Name (Last, First, Middle Initial)

B. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

398.01

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254785

Amount of Each Receipt this Period

33.48

Full Name (Last, First, Middle Initial)

C. MARK A MCGILLIVRAY

Mailing Address 1028 PORTSMOUTH CIRCLE

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CLM-Centralized Servi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353393

Amount of Each Receipt this Period

33.48

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

85.46

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City	State	Zip Code
Akron	OH	44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

559.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254784

Amount of Each Receipt this Period

46.81

Full Name (Last, First, Middle Initial)

B. EVA M MCINTEE

Mailing Address 4109 W Bath Road

City	State	Zip Code
Akron	OH	44333

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353392

Amount of Each Receipt this Period

46.81

Full Name (Last, First, Middle Initial)

C. JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City	State	Zip Code
LAKE ZURICH	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Technology Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254629

Amount of Each Receipt this Period

30.51

SUBTOTAL of Receipts This Page (optional)..... ►

124.13

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY J MCRAE

Mailing Address 83 Arcadia Lane

City

LAKE ZURICH

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Technology Strate

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

361.01

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353237

Amount of Each Receipt this Period

30.51

Full Name (Last, First, Middle Initial)

B. Jesse E Merten

Mailing Address 76 Logan Loop

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

862.89

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254830

Amount of Each Receipt this Period

72.00

Full Name (Last, First, Middle Initial)

C. Jesse E Merten

Mailing Address 76 Logan Loop

City

Highland Park

State

IL

Zip Code

60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Treasurer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

934.89

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353440

Amount of Each Receipt this Period

72.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

174.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
 PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

216.08

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254693

Amount of Each Receipt this Period

19.92

Full Name (Last, First, Middle Initial)

B. HANS H METZINGER

Mailing Address 407 E. CLAIRE LANE

City State Zip Code
 PROSPECT HTS IL 60070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Fld SSD-Sales Ops-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

236.00

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353301

Amount of Each Receipt this Period

19.92

Full Name (Last, First, Middle Initial)

C. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Enterprise Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

262.76

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254579

Amount of Each Receipt this Period

22.14

SUBTOTAL of Receipts This Page (optional)..... ►

61.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN W MICHELI

Mailing Address 2245 Hazeltine Drive

City State Zip Code
 Vernon Hills IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-ABO-Enterprise Servic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.90

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353187

Amount of Each Receipt this Period

22.14

Full Name (Last, First, Middle Initial)

B. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code
 Huddleston VA 24104

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

387.30

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254636

Amount of Each Receipt this Period

35.46

Full Name (Last, First, Middle Initial)

C. FREDERICK J MILLER

Mailing Address 16343 Smith Mountain Lake Parkway

City State Zip Code
 Huddleston VA 24104

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

422.76

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353244

Amount of Each Receipt this Period

35.46

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

93.06

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 100 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN M MILLER

Mailing Address 436 N. Harrison St

City
ALGONQUINState Zip Code
IL 60102FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254736

Amount of Each Receipt this Period

26.16

Full Name (Last, First, Middle Initial)

B. STEVEN M MILLER

Mailing Address 436 N. Harrison St

City
ALGONQUINState Zip Code
IL 60102FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-AF-Technology

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353344

Amount of Each Receipt this Period

26.16

Full Name (Last, First, Middle Initial)

C. AMY B MILLS

Mailing Address 1145 Norman Lane

City
DeerfieldState Zip Code
IL 60015FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.04

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254802

Amount of Each Receipt this Period

23.08

SUBTOTAL of Receipts This Page (optional)..... ►

75.40

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. AMY B MILLS

Mailing Address 1145 Norman Lane

City

Deerfield

State

IL

Zip Code

60015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

296.12

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353410

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

B. ALLISON L MOE

Mailing Address 215 Brampton Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.72

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254673

Amount of Each Receipt this Period

31.67

Full Name (Last, First, Middle Initial)

C. ALLISON L MOE

Mailing Address 215 Brampton Lane

City

Lake Forest

State

IL

Zip Code

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

347.39

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353281

Amount of Each Receipt this Period

31.67

SUBTOTAL of Receipts This Page (optional)..... ►

86.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES R MOSELEY

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.74

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254618

Amount of Each Receipt this Period

17.67

Full Name (Last, First, Middle Initial)

B. JAMES R MOSELEY

Mailing Address 1709 Montclair Blvd

City

Brentwood

State

TN

Zip Code

37027

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

HR-Client Partner Field B

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.41

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353226

Amount of Each Receipt this Period

17.67

Full Name (Last, First, Middle Initial)

C. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-State Filings-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.55

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254611

Amount of Each Receipt this Period

42.47

SUBTOTAL of Receipts This Page (optional)..... ►

77.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 103 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MEGHAN O MULVIHILL

Mailing Address 2445 CHERRY LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-State Filings-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353219

Amount of Each Receipt this Period

42.47

Full Name (Last, First, Middle Initial)

B. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.19

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254655

Amount of Each Receipt this Period

45.77

Full Name (Last, First, Middle Initial)

C. MICHAEL F MULVIHILL

Mailing Address 2445 CHERRY LANE

City	State	Zip Code
NORTHBROOK	IL	60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353263

Amount of Each Receipt this Period

45.77

SUBTOTAL of Receipts This Page (optional)..... ►

134.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES E MURRAY

Mailing Address 23665 N. HILLFARM RD

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.34

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254560

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

B. JAMES E MURRAY

Mailing Address 23665 N. HILLFARM RD

City State Zip Code
 LAKE BARRINGTON IL 60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Claims Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

558.41

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353167

Amount of Each Receipt this Period

56.07

Full Name (Last, First, Middle Initial)

C. DON J MYKETIAK

Mailing Address 28W770 HAWTHORNE LANE

City State Zip Code
 WEST CHICAGO IL 60185

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.39

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353300

Amount of Each Receipt this Period

16.14

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

128.28

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 105 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

818.19

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254728

Amount of Each Receipt this Period

69.06

Full Name (Last, First, Middle Initial)

B. DAVID G NADIG

Mailing Address 2950 LAKE PLACID

City

NORTHBROOK

State

IL

Zip Code

60062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Protection Law

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

887.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353336

Amount of Each Receipt this Period

69.06

Full Name (Last, First, Middle Initial)

C. DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City

LAKE BARRINGTON

State

IL

Zip Code

60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Business

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

449.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254646

Amount of Each Receipt this Period

74.95

SUBTOTAL of Receipts This Page (optional)..... ►

213.07

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 106 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DANIEL C NECASTRO

Mailing Address 22622 N. LINDEN DR

City	State	Zip Code
LAKE BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ATO-Bus Prtn-Business

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

524.65

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353254

Amount of Each Receipt this Period

74.95

Full Name (Last, First, Middle Initial)

B. Stephanie D Neely

Mailing Address 1140 E 44th St.

City	State	Zip Code
Chicago	IL	60653

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-FSS-Assistant Treasure

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353456

Amount of Each Receipt this Period

23.08

Full Name (Last, First, Middle Initial)

C. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City	State	Zip Code
DEER PARK	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

778.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254770

Amount of Each Receipt this Period

65.32

SUBTOTAL of Receipts This Page (optional)..... ►

163.35

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICK K NOLL

Mailing Address 22451 THORNBURY CT

City
DEER PARKState Zip Code
IL 60010FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-LGL-Enterprise Busine

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.40

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353378

Amount of Each Receipt this Period

65.32

Full Name (Last, First, Middle Initial)

B. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City
LAKE ZURICHState Zip Code
IL 60047FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

267.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254641

Amount of Each Receipt this Period

22.47

Full Name (Last, First, Middle Initial)

C. RICHARD C O'BRIEN

Mailing Address 574 S. COUNTRY RIDGE

City
LAKE ZURICHState Zip Code
IL 60047FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
ALR-Cust Fulfillment-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.13

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353249

Amount of Each Receipt this Period

22.47

SUBTOTAL of Receipts This Page (optional)..... ►

110.26

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL C OCONNOR

Mailing Address 1231 Isabella Street

City State Zip Code
 Evanston IL 60201

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company Mktg-Direct Mktg Program

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.95

Date of Receipt

MM / DD / YYYY
 06 / 26 / 2015

Transaction ID : A2015-1353265

Amount of Each Receipt this Period

16.63

Full Name (Last, First, Middle Initial)

B. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

503.61

Date of Receipt

MM / DD / YYYY
 06 / 12 / 2015

Transaction ID : A2015-1254632

Amount of Each Receipt this Period

42.23

Full Name (Last, First, Middle Initial)

C. KENNETH I OMURA

Mailing Address 361 KELBURN RD. #315

City State Zip Code
 DEERFIELD IL 60015

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.84

Date of Receipt

MM / DD / YYYY
 06 / 26 / 2015

Transaction ID : A2015-1353240

Amount of Each Receipt this Period

42.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

101.09

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAMELA J OVERTON

Mailing Address 1677 Lee Road

City

Clearwater

State

FL

Zip Code

33765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

624.58

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254628

Amount of Each Receipt this Period

52.66

Full Name (Last, First, Middle Initial)

B. PAMELA J OVERTON

Mailing Address 1677 Lee Road

City

Clearwater

State

FL

Zip Code

33765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership F

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

677.24

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353236

Amount of Each Receipt this Period

52.66

Full Name (Last, First, Middle Initial)

C. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City

GLENVIEW

State

IL

Zip Code

60025

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.78

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254723

Amount of Each Receipt this Period

47.67

SUBTOTAL of Receipts This Page (optional)..... ►

152.99

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LAURIE PELLOUCHOUD

Mailing Address 1447 PLEASANT

City State Zip Code
GLENVIEW IL 60025

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-PRD-Homeowners

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

613.45

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353331

Amount of Each Receipt this Period

47.67

Full Name (Last, First, Middle Initial)

B. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-ATO-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

577.97

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254836

Amount of Each Receipt this Period

48.61

Full Name (Last, First, Middle Initial)

c. Opal G Perry

Mailing Address 2775 N. Sanders Rd.

City State Zip Code
Northbrook IL 60062

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance Company

Occupation
VP-ATO-International COO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

626.58

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353446

Amount of Each Receipt this Period

48.61

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

144.89

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

433.01

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254805

Amount of Each Receipt this Period

36.35

Full Name (Last, First, Middle Initial)

B. THOMAS S PETERSON

Mailing Address 2756 BRECKENRIDGE LANE

City

NAPERVILLE

State

IL

Zip Code

60565

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Sr Mgr

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

469.36

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353413

Amount of Each Receipt this Period

36.35

Full Name (Last, First, Middle Initial)

C. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City

MUNDELEIN

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Property & Casualty

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

682.36

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254582

Amount of Each Receipt this Period

57.49

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

130.19

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 112 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN A PETTI

Mailing Address 580 SALCEDA DR

City
MUNDELEINState
IL Zip Code
60060FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
VP-PF-Property & Casualty

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

739.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353190

Amount of Each Receipt this Period

57.49

Full Name (Last, First, Middle Initial)

B. NANCY W PHILLIPS

Mailing Address 102 RIVER OAKS RD

City
BRENTWOODState
TN Zip Code
37027FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

243.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254627

Amount of Each Receipt this Period

34.76

Full Name (Last, First, Middle Initial)

C. NANCY W PHILLIPS

Mailing Address 102 RIVER OAKS RD

City
BRENTWOODState
TN Zip Code
37027FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Lit Svcs Attorney-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.08

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353235

Amount of Each Receipt this Period

34.76

SUBTOTAL of Receipts This Page (optional)..... ►

127.01

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 113 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City	State	Zip Code
CHICAGO	IL	60647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

502.08

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254645

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

B. JOHN C PINTOZZI

Mailing Address 2114 W Cortland ST

City	State	Zip Code
CHICAGO	IL	60647

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-INV-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

543.92

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353253

Amount of Each Receipt this Period

41.84

Full Name (Last, First, Middle Initial)

C. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City	State	Zip Code
Gainesville	VA	20155

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Pres. Eastern Ter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1009.41

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254577

Amount of Each Receipt this Period

84.74

SUBTOTAL of Receipts This Page (optional)..... ►

168.42

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID J PRENDERGAST

Mailing Address 8262 Arrowleaf Turn

City State Zip Code
 Gainesville VA 20155

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-SAL-Pres. Eastern Ter

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1094.15

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353185

Amount of Each Receipt this Period

84.74

Full Name (Last, First, Middle Initial)

B. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
 DEER PARK IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

332.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254725

Amount of Each Receipt this Period

27.99

Full Name (Last, First, Middle Initial)

C. THOMAS G PURTELL

Mailing Address 22663 CHESHIRE COURT

City State Zip Code
 DEER PARK IL 60010

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PF-Agent Comp-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.81

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353333

Amount of Each Receipt this Period

27.99

SUBTOTAL of Receipts This Page (optional)..... ►

140.72

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 115 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY JO J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City	State	Zip Code
ARLINGTON HEIGH	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

588.30

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254748

Amount of Each Receipt this Period

49.64

Full Name (Last, First, Middle Initial)

B. MARY JO J QUINN

Mailing Address 837 S. CHESTNUT AVENUE

City	State	Zip Code
ARLINGTON HEIGH	IL	60005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Investment Law

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

637.94

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353356

Amount of Each Receipt this Period

49.64

Full Name (Last, First, Middle Initial)

C. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City	State	Zip Code
OAK LAWN	IL	60453

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

777.02

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254676

Amount of Each Receipt this Period

66.60

SUBTOTAL of Receipts This Page (optional)..... ►

165.88

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARIO RIZZO

Mailing Address 5926 W. 90TH PLACE

City
OAK LAWNState Zip Code
IL 60453FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-APL-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

843.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353284

Amount of Each Receipt this Period

66.60

Full Name (Last, First, Middle Initial)

B. Kendra L Roberts

Mailing Address One North O'Plaine Road #7894

City
GurneeState Zip Code
IL 60031FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.32

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254815

Amount of Each Receipt this Period

23.13

Full Name (Last, First, Middle Initial)

C. Kendra L Roberts

Mailing Address One North O'Plaine Road #7894

City
GurneeState Zip Code
IL 60031FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
L&R-Ins Ops Attorney-Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.45

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353425

Amount of Each Receipt this Period

23.13

SUBTOTAL of Receipts This Page (optional)..... ►

112.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 117 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROGER S ROBINSON

Mailing Address 535 6th Street North

City

St. Petersburg

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Regional Bus Comm-Sr M

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

332.61

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254622

Amount of Each Receipt this Period

28.22

Full Name (Last, First, Middle Initial)

B. ROGER S ROBINSON

Mailing Address 535 6th Street North

City

St. Petersburg

State

FL

Zip Code

33701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Regional Bus Comm-Sr M

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353230

Amount of Each Receipt this Period

28.22

Full Name (Last, First, Middle Initial)

C. GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City

RIVER FOREST

State

IL

Zip Code

60305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

555.64

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254643

Amount of Each Receipt this Period

46.90

SUBTOTAL of Receipts This Page (optional)..... ►

103.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 118 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GREGORY C ROHLFING

Mailing Address 106 ASHLAND

City
RIVER FORESTState Zip Code
IL 60305FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp/Claim Lit Attorn

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

602.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353251

Amount of Each Receipt this Period

46.90

Full Name (Last, First, Middle Initial)

B. ANDREW R ROMERO

Mailing Address 3151 Montrose Way

City
El Dorado HillsState Zip Code
CA 95762FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.43

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254783

Amount of Each Receipt this Period

20.08

Full Name (Last, First, Middle Initial)

C. ANDREW R ROMERO

Mailing Address 3151 Montrose Way

City
El Dorado HillsState Zip Code
CA 95762FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.51

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353391

Amount of Each Receipt this Period

20.08

SUBTOTAL of Receipts This Page (optional)..... ►

87.06

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 119 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

527.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254706

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

B. JOHN ROSZKOWSKI

Mailing Address 3371 VENARD RD.

City	State	Zip Code
DOWNERS GROVE	IL	60515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Manager-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

571.61

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353314

Amount of Each Receipt this Period

43.97

Full Name (Last, First, Middle Initial)

C. CASSANDRA C RUSSELL

Mailing Address 2579 E Kaibab Pl

City	State	Zip Code
Chandler	AZ	85249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254761

Amount of Each Receipt this Period

19.68

SUBTOTAL of Receipts This Page (optional)..... ►

107.62

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 120 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CASSANDRA C RUSSELL

Mailing Address 2579 E Kaibab Pl

City

State

Zip Code

Chandler

AZ

85249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

Claims-Field Leadership-D

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

252.42

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353369

Amount of Each Receipt this Period

19.68

Full Name (Last, First, Middle Initial)

B. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

State

Zip Code

LAKE FOREST

IL

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

556.84

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254642

Amount of Each Receipt this Period

46.73

Full Name (Last, First, Middle Initial)

C. PAUL R RYSKE

Mailing Address 898 LONGWOOD DR.

City

State

Zip Code

LAKE FOREST

IL

60045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Allstate Insurance Company

L&R-Spcl Ops Attorney-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

603.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353250

Amount of Each Receipt this Period

46.73

SUBTOTAL of Receipts This Page (optional)..... ►

113.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Donald D Sands

Mailing Address 321 North Brainard Avenue

City State Zip Code
 Lagrange Park IL 60526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Dist. Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

707.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254822

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

B. Donald D Sands

Mailing Address 321 North Brainard Avenue

City State Zip Code
 Lagrange Park IL 60526

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-APL-Strategic Dist. Bu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

766.88

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353432

Amount of Each Receipt this Period

59.08

Full Name (Last, First, Middle Initial)

C. PATRICK J SARB

Mailing Address 4517 WAUBANSIE LANE

City State Zip Code
 LISLE IL 60532

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Environmental Sci-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353350

Amount of Each Receipt this Period

16.20

SUBTOTAL of Receipts This Page (optional)..... ►

134.36

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 122 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City	State	Zip Code
Tierra Verde	FL	33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Encompass Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254678

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

B. KAREN M SCHECHT

Mailing Address 754 Pinellas Bayway S

City	State	Zip Code
Tierra Verde	FL	33715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-CLM-Encompass Claims

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

231.50

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353286

Amount of Each Receipt this Period

17.87

Full Name (Last, First, Middle Initial)

C. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

727.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254598

Amount of Each Receipt this Period

61.04

SUBTOTAL of Receipts This Page (optional)..... ►

96.78

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 123 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN E SCHOLL

Mailing Address 7 COPPERFIELD DRIVE

City	State	Zip Code
HAWTHORN WOODS	IL	60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-HR-HR Business Partner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.84

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353206

Amount of Each Receipt this Period

61.04

Full Name (Last, First, Middle Initial)

B. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City	State	Zip Code
Flemington	NJ	08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.38

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254774

Amount of Each Receipt this Period

22.53

Full Name (Last, First, Middle Initial)

C. DALE J SCHUELLER

Mailing Address 25 Scarlet Oak Rd

City	State	Zip Code
Flemington	NJ	08822

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

290.91

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353382

Amount of Each Receipt this Period

22.53

SUBTOTAL of Receipts This Page (optional)..... ►

106.10

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Shayna M Schulz

Mailing Address 439 Orchard Lane

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-ABO-Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.16

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254823

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

B. Shayna M Schulz

Mailing Address 439 Orchard Lane

City State Zip Code
 Highland Park IL 60035

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company VP-ABO-Customer Service

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.16

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353433

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

C. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City State Zip Code
 CHICAGO IL 60631

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

690.82

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254675

Amount of Each Receipt this Period

58.38

SUBTOTAL of Receipts This Page (optional)..... ►

92.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 125 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PAUL SCHUTT

Mailing Address 6323 N. NORMANDY

City	State	Zip Code
CHICAGO	IL	60631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

749.20

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353283

Amount of Each Receipt this Period

58.38

Full Name (Last, First, Middle Initial)

B. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City	State	Zip Code
Phoenixville	PA	19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254754

Amount of Each Receipt this Period

55.91

Full Name (Last, First, Middle Initial)

C. DAVID J SCHWARTZER

Mailing Address 128 Waverly Circle

City	State	Zip Code
Phoenixville	PA	19460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

721.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353362

Amount of Each Receipt this Period

55.91

SUBTOTAL of Receipts This Page (optional)..... ►

170.20

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strat Deployment-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254586

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

B. ALBERT SCHWARZHAUPT

Mailing Address 29 Doral Drive

City

Hawthorn Woods

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Ag Ops-Strat Deployment-S

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353194

Amount of Each Receipt this Period

18.42

Full Name (Last, First, Middle Initial)

c. Obie A Scott

Mailing Address 2173 Ranch View Dr.

City

Rocklin

State

CA

Zip Code

95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.69

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254795

Amount of Each Receipt this Period

31.82

SUBTOTAL of Receipts This Page (optional)..... ►

68.66

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Obie A Scott

Mailing Address 2173 Ranch View Dr.

City	State	Zip Code
Rocklin	CA	95765

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Territorial Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6	/	2	6	/	2	0	1	5		

Transaction ID : A2015-1353403

Amount of Each Receipt this Period

31.82

Full Name (Last, First, Middle Initial)

B. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

689.68

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6	/	1	2	/	2	0	1	5		

Transaction ID : A2015-1254702

Amount of Each Receipt this Period

58.52

Full Name (Last, First, Middle Initial)

C. STACY Y SHARPE

Mailing Address 1100 N. Lake Shore Drive

City	State	Zip Code
Chicago	IL	60611

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-CR-Strategic & Consum

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

748.20

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6	/	2	6	/	2	0	1	5		

Transaction ID : A2015-1353310

Amount of Each Receipt this Period

58.52

SUBTOTAL of Receipts This Page (optional)..... ►

148.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 128 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City
WHEATONState
ILZip Code
60189FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2076.96

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254682

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

B. STEVEN E SHEBIK

Mailing Address 517 ROBINWOOD LANE

City
WHEATONState
ILZip Code
60189FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-FSS-Chief Financial O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.04

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353290

Amount of Each Receipt this Period

173.08

Full Name (Last, First, Middle Initial)

C. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City
HIGHLAND PARKState
ILZip Code
60035FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.32

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254639

Amount of Each Receipt this Period

22.74

SUBTOTAL of Receipts This Page (optional)..... ►

368.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 129 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN R SHEFFEY

Mailing Address 839 SUMAC

City	State	Zip Code
HIGHLAND PARK	IL	60035

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

292.06

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353247

Amount of Each Receipt this Period

22.74

Full Name (Last, First, Middle Initial)

B. ADAM R SHORES

Mailing Address 680 Brookstone Road

City	State	Zip Code
Grayslake	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Public Affairs-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.64

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254801

Amount of Each Receipt this Period

29.72

Full Name (Last, First, Middle Initial)

C. ADAM R SHORES

Mailing Address 680 Brookstone Road

City	State	Zip Code
Grayslake	IL	60030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Public Affairs-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

382.36

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353409

Amount of Each Receipt this Period

29.72

SUBTOTAL of Receipts This Page (optional)..... ►

82.18

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 130 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City	State	Zip Code
FAIR OAKS	CA	95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-FPMO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

293.88

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254739

Amount of Each Receipt this Period

24.67

Full Name (Last, First, Middle Initial)

B. DENIS C SHUNTA

Mailing Address 5200 RIDGEGATE WAY

City	State	Zip Code
FAIR OAKS	CA	95628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-FPMO-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.55

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353347

Amount of Each Receipt this Period

24.67

Full Name (Last, First, Middle Initial)

C. ROBERT L SIMMONS

Mailing Address 1146 39th Ave NE

City	State	Zip Code
St Petersburg	FL	33703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.79

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254592

Amount of Each Receipt this Period

37.09

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

86.43

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ROBERT L SIMMONS

Mailing Address 1146 39th Ave NE

City

St Petersburg

State

FL

Zip Code

33703

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

478.88

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353200

Amount of Each Receipt this Period

37.09

Full Name (Last, First, Middle Initial)

B. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Risk Mgmt-Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.86

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254698

Amount of Each Receipt this Period

32.65

Full Name (Last, First, Middle Initial)

C. KIMBERLY J SLOANE

Mailing Address 650 Rochelle Terrace

City

LOMBARD

State

IL

Zip Code

60148

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Risk Mgmt-Sr Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.51

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353306

Amount of Each Receipt this Period

32.65

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

102.39

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

 FOR LINE NUMBER: PAGE 132 OF 170
 (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANN M SMITH

Mailing Address 16801 Carmichael Place

City	State	Zip Code
Purcellville	VA	20132

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Sales Administrative Lead

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.54

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353174

Amount of Each Receipt this Period

15.58

Full Name (Last, First, Middle Initial)

B. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

471.78

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254758

Amount of Each Receipt this Period

39.75

Full Name (Last, First, Middle Initial)

C. CHARLES M SMITH

Mailing Address 414 E. Burr Oak Dr.

City	State	Zip Code
Arlington Heights	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Sr E

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

511.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353366

Amount of Each Receipt this Period

39.75

SUBTOTAL of Receipts This Page (optional)..... ►

95.08

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 133 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp Gov Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.90

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254683

Amount of Each Receipt this Period

19.75

Full Name (Last, First, Middle Initial)

B. KATHERINE A SMITH

Mailing Address 231 KAINER AVENUE

City	State	Zip Code
BARRINGTON	IL	60010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Corp Gov Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

253.65

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353291

Amount of Each Receipt this Period

19.75

Full Name (Last, First, Middle Initial)

C. KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City	State	Zip Code
OAK PARK	IL	60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254704

Amount of Each Receipt this Period

17.46

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

56.96

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 134 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KENNETH D SMITH

Mailing Address 619 N HUMPHREY AVE.

City

OAK PARK

State

IL

Zip Code

60302

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Architect & Constr-Sr

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.81

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353312

Amount of Each Receipt this Period

17.46

Full Name (Last, First, Middle Initial)

B. RICHARD J SMITH Jr.

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

298.28

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254763

Amount of Each Receipt this Period

25.22

Full Name (Last, First, Middle Initial)

C. RICHARD J SMITH Jr.

Mailing Address 597 TREETOP LANE

City

GURNEE

State

IL

Zip Code

60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PRD-Product Vice Presi

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

323.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353371

Amount of Each Receipt this Period

25.22

SUBTOTAL of Receipts This Page (optional)..... ►

67.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1174.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254749

Amount of Each Receipt this Period

99.82

Full Name (Last, First, Middle Initial)

B. STEVEN P SORENSON

Mailing Address 20712 High Ridge Dr

City

KILDEER

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-PRD-Product Operation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1274.26

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353357

Amount of Each Receipt this Period

99.82

Full Name (Last, First, Middle Initial)

C. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City

GLENVIEW

State

IL

Zip Code

60026

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

482.79

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254720

Amount of Each Receipt this Period

40.36

SUBTOTAL of Receipts This Page (optional)..... ►

240.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 136 OF 170

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KEVIN A SPATARO

Mailing Address 1663 SARATOGA LANE

City	State	Zip Code
GLENVIEW	IL	60026

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-FSS-Accounting Resear

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.15

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353328

Amount of Each Receipt this Period

40.36

Full Name (Last, First, Middle Initial)

B. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
PF Fld-Fin Analysis-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

377.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		12		2015

Transaction ID : A2015-1254735

Amount of Each Receipt this Period

31.99

Full Name (Last, First, Middle Initial)

C. BRIAN M SPENCE

Mailing Address 1001 N Vermont St

City	State	Zip Code
Arlington	VA	22201

FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
PF Fld-Fin Analysis-Sr Mg

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		26		2015

Transaction ID : A2015-1353343

Amount of Each Receipt this Period

31.99

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

104.34

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 137 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Gilda L Spencer

Mailing Address 1675 N. Pebble Beach Way

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Dispute Resolutio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254839

Amount of Each Receipt this Period

32.76

Full Name (Last, First, Middle Initial)

B. Gilda L Spencer

Mailing Address 1675 N. Pebble Beach Way

City	State	Zip Code
Vernon Hills	IL	60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-LGL-Dispute Resolutio

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.62

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353449

Amount of Each Receipt this Period

32.76

Full Name (Last, First, Middle Initial)

C. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

744.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254634

Amount of Each Receipt this Period

62.31

SUBTOTAL of Receipts This Page (optional)..... ►

127.83

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 138 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY SPRINGBERG

Mailing Address 4745 KINGS WAY - NORTH

City	State	Zip Code
GURNEE	IL	60031

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ATO-Bus Prtn-Product O

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

807.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353242

Amount of Each Receipt this Period

62.31

Full Name (Last, First, Middle Initial)

B. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City	State	Zip Code
ATLANTIC BEACH	FL	32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

541.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254624

Amount of Each Receipt this Period

45.45

Full Name (Last, First, Middle Initial)

C. GARY S STERE

Mailing Address 2015 SELVA MADERA COURT

City	State	Zip Code
ATLANTIC BEACH	FL	32233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

587.21

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353232

Amount of Each Receipt this Period

45.45

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

153.21

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JOHN A STOLTE

Mailing Address 330 KAREN WAY

City
TIBURONState
CAZip Code
94920FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

222.31

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254790

Amount of Each Receipt this Period

20.41

Full Name (Last, First, Middle Initial)

B. JOHN A STOLTE

Mailing Address 330 KAREN WAY

City
TIBURONState
CAZip Code
94920FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Leader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

242.72

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353398

Amount of Each Receipt this Period

20.41

Full Name (Last, First, Middle Initial)

C. MYRON E STOUFFER

Mailing Address 324 W. Cook

City
LIBERTYVILLEState
ILZip Code
60048FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Indpt. Agencies &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

391.44

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254620

Amount of Each Receipt this Period

32.98

SUBTOTAL of Receipts This Page (optional)..... ►

73.80

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MYRON E STOUFFER

Mailing Address 324 W. Cook

City
LIBERTYVILLEState Zip Code
IL 60048FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Indpt. Agencies &

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

424.42

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353228

Amount of Each Receipt this Period

32.98

Full Name (Last, First, Middle Initial)

B. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City
ELMHURSTState Zip Code
IL 60126FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

773.88

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254648

Amount of Each Receipt this Period

64.49

Full Name (Last, First, Middle Initial)

C. KATHLEEN A SWAIN

Mailing Address 242 HIGHVIEW

City
ELMHURSTState Zip Code
IL 60126FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-FSS-Internal Auditing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

838.37

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353256

Amount of Each Receipt this Period

64.49

SUBTOTAL of Receipts This Page (optional)..... ►

161.96

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
 FRANKLIN TN 37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Distribution-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.40

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254654

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

B. CARL J TACKETT

Mailing Address 307 WENDRON COURT

City State Zip Code
 FRANKLIN TN 37069

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ALR-Distribution-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

271.42

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 26 / 2015

Transaction ID : A2015-1353262

Amount of Each Receipt this Period

21.02

Full Name (Last, First, Middle Initial)

C. SEAN D THAKUR

Mailing Address 222 S.Caldwell St

City State Zip Code
 Charlotte NC 28202

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

241.38

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 12 / 2015

Transaction ID : A2015-1254765

Amount of Each Receipt this Period

20.19

SUBTOTAL of Receipts This Page (optional)..... ►

62.23

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. SEAN D THAKUR

Mailing Address 222 S.Caldwell St

City

Charlotte

State

NC

Zip Code

28202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Dir

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

261.57

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353373

Amount of Each Receipt this Period

20.19

Full Name (Last, First, Middle Initial)

B. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Administration & R

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

320.22

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254804

Amount of Each Receipt this Period

27.12

Full Name (Last, First, Middle Initial)

C. MICHAEL A THOMAS

Mailing Address 152 Robsart Place

City

KENILWORTH

State

IL

Zip Code

60043

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-ABO-Administration & R

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

347.34

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353412

Amount of Each Receipt this Period

27.12

SUBTOTAL of Receipts This Page (optional)..... ►

74.43

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City
CHICAGOState
ILZip Code
60649FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Strategic Bus Comm-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.97

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254669

Amount of Each Receipt this Period

35.13

Full Name (Last, First, Middle Initial)

B. GERALYN A THOMPSON

Mailing Address 6906 S. BENNETT

City
CHICAGOState
ILZip Code
60649FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Strategic Bus Comm-Sr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452.10

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	6		2	0	1	5

Transaction ID : A2015-1353277

Amount of Each Receipt this Period

35.13

Full Name (Last, First, Middle Initial)

C. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City
Castle RockState
COZip Code
80108FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

644.58

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	2		2	0	1	5

Transaction ID : A2015-1254617

Amount of Each Receipt this Period

54.69

SUBTOTAL of Receipts This Page (optional)..... ►

124.95

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM J THOMPSON

Mailing Address 5129 Pine River Trail

City

Castle Rock

State

CO

Zip Code

80108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

699.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353225

Amount of Each Receipt this Period

54.69

Full Name (Last, First, Middle Initial)

B. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254762

Amount of Each Receipt this Period

56.69

Full Name (Last, First, Middle Initial)

C. MELINDA S TUNNER

Mailing Address 190 West Johnson Street

City

Palatine

State

IL

Zip Code

60067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-SAL-Sales Programs

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

733.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353370

Amount of Each Receipt this Period

58.00

SUBTOTAL of Receipts This Page (optional)..... ►

169.38

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City
ENGLEWOODState Zip Code
CO 80111FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

276.27

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015**Transaction ID : A2015-1254581**

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

B. RICHARD D TURANO

Mailing Address 4960 S CHESTER ST

City
ENGLEWOODState Zip Code
CO 80111FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.63

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015**Transaction ID : A2015-1353189**

Amount of Each Receipt this Period

23.36

Full Name (Last, First, Middle Initial)

C. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City
ELMHURSTState Zip Code
IL 60126FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Sup & Proc Des-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.11

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015**Transaction ID : A2015-1254684**

Amount of Each Receipt this Period

42.58

SUBTOTAL of Receipts This Page (optional)..... ►

89.30

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. THOMAS P TUZAK

Mailing Address 443 HUNTINGTON LANE

City State Zip Code
ELMHURST IL 60126

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Claims-Sup & Proc Des-Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

402.69

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353292

Amount of Each Receipt this Period

42.58

Full Name (Last, First, Middle Initial)

B. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

788.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254679

Amount of Each Receipt this Period

66.23

Full Name (Last, First, Middle Initial)

C. WILLIAM A VAINISI

Mailing Address 636 BALMORAL LANE

City State Zip Code
INVERNESS IL 60067

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company SVP-LGL-Government & Indu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

855.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353287

Amount of Each Receipt this Period

66.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.04

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City	State	Zip Code
CRYSTAL LAKE	IL	60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.30

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254688

Amount of Each Receipt this Period

18.14

Full Name (Last, First, Middle Initial)

B. LISA A VAN SCOYOC

Mailing Address 555 PRIMROSE LANE

City	State	Zip Code
CRYSTAL LAKE	IL	60014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

233.44

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353296

Amount of Each Receipt this Period

18.14

Full Name (Last, First, Middle Initial)

C. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City	State	Zip Code
Wilmette	IL	60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

874.98

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254780

Amount of Each Receipt this Period

73.59

SUBTOTAL of Receipts This Page (optional)..... ►

109.87

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 148 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA C VANLAMMEREN

Mailing Address 2800 Birchwood Avenue

City

Wilmette

State

IL

Zip Code

60091

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Field Business Co

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

948.57

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	5		

Transaction ID : A2015-1353388

Amount of Each Receipt this Period

73.59

Full Name (Last, First, Middle Initial)

B. MICHAEL F VITALE Jr.

Mailing Address 1824 Roy Lane

City

Forks Twp.

State

PA

Zip Code

18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.13

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			1	2			2	0	1	5		

Transaction ID : A2015-1254605

Amount of Each Receipt this Period

18.61

Full Name (Last, First, Middle Initial)

C. MICHAEL F VITALE Jr.

Mailing Address 1824 Roy Lane

City

Forks Twp.

State

PA

Zip Code

18040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Regional Sales Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

238.74

Date of Receipt

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	6			2	6			2	0	1	5		

Transaction ID : A2015-1353213

Amount of Each Receipt this Period

18.61

SUBTOTAL of Receipts This Page (optional)..... ►

110.81

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City
GURNEEState Zip Code
IL 60031FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CE-Strategic Operations-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.40

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254724

Amount of Each Receipt this Period

21.15

Full Name (Last, First, Middle Initial)

B. EDWIN L WASINGER JR

Mailing Address 6245 MURIFIELD DRIVE

City
GURNEEState Zip Code
IL 60031FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
CE-Strategic Operations-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

273.55

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353332

Amount of Each Receipt this Period

21.15

Full Name (Last, First, Middle Initial)

C. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City
WheatonState Zip Code
IL 60188FEC ID number of contributing
federal political committee.

C

Name of Employer
Allstate Insurance CompanyOccupation
SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

879.55

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254820

Amount of Each Receipt this Period

73.84

SUBTOTAL of Receipts This Page (optional)..... ►

116.14

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Robert Wasserman

Mailing Address 1N165 Partridge Dr

City State Zip Code
Wheaton IL 60188

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company SVP-MRK-eBusiness & Direc

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

953.39

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353430

Amount of Each Receipt this Period

73.84

Full Name (Last, First, Middle Initial)

B. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City State Zip Code
Trinity FL 34655

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.50

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254799

Amount of Each Receipt this Period

18.43

Full Name (Last, First, Middle Initial)

C. LEWIS C WEBB II

Mailing Address 1444 El Pardo Dr

City State Zip Code
Trinity FL 34655

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
Allstate Insurance Company Regional Financial Sales

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353407

Amount of Each Receipt this Period

18.43

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

110.70

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Mary P Weiss

Mailing Address 5209 Westwood Drive

City	State	Zip Code
Bethesda	MD	20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2328.49

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254844

Amount of Each Receipt this Period

195.08

Full Name (Last, First, Middle Initial)

B. Mary P Weiss

Mailing Address 5209 Westwood Drive

City	State	Zip Code
Bethesda	MD	20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-LGL-Legislative & Regu

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2523.57

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353454

Amount of Each Receipt this Period

195.08

Full Name (Last, First, Middle Initial)

C. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City	State	Zip Code
Franklin	TN	37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.32

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254591

Amount of Each Receipt this Period

26.84

SUBTOTAL of Receipts This Page (optional)..... ►

417.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CYNTHIA A WHITFIELD

Mailing Address 298 Keswick Grove Lane

City

Franklin

State

TN

Zip Code

37067

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-SAL-Field Senior Vice

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

343.16

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353199

Amount of Each Receipt this Period

26.84

Full Name (Last, First, Middle Initial)

B. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

564.90

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254656

Amount of Each Receipt this Period

47.51

Full Name (Last, First, Middle Initial)

C. JOHN K WILCOX

Mailing Address 1120 JESSICA LANE

City

LIBERTYVILLE

State

IL

Zip Code

60048

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-PF-Insurance Operation

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

612.41

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353264

Amount of Each Receipt this Period

47.51

SUBTOTAL of Receipts This Page (optional)..... ►

121.86

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

350.95

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254619

Amount of Each Receipt this Period

29.46

Full Name (Last, First, Middle Initial)

B. JAMES L WILLCOX

Mailing Address 1562 Sienna Oak Court

City

Sandy

State

UT

Zip Code

84092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Claims-Field Leadership R

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

380.41

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		2	6		2	0	1	5		

Transaction ID : A2015-1353227

Amount of Each Receipt this Period

29.46

Full Name (Last, First, Middle Initial)

C. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

555.83

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		1	2		2	0	1	5		

Transaction ID : A2015-1254670

Amount of Each Receipt this Period

46.66

SUBTOTAL of Receipts This Page (optional)..... ►

105.58

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. JEFFREY W WILLIAMS

Mailing Address 7104 CHARDON COURT

City

CLARKSVILLE

State

MD

Zip Code

21029

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

613.83

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353278

Amount of Each Receipt this Period

58.00

Full Name (Last, First, Middle Initial)

B. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3271.11

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254745

Amount of Each Receipt this Period

276.92

Full Name (Last, First, Middle Initial)

C. THOMAS J WILSON

Mailing Address 2024 N. MOHAWK

City

CHICAGO

State

IL

Zip Code

60614

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3548.03

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353353

Amount of Each Receipt this Period

276.92

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

611.84

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 155 OF 170
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. KURT L WINTER

Mailing Address 1403 N. WALNUT

City	State	Zip Code
ARLINGTON HGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.12

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254800

Amount of Each Receipt this Period

23.68

Full Name (Last, First, Middle Initial)

B. KURT L WINTER

Mailing Address 1403 N. WALNUT

City	State	Zip Code
ARLINGTON HGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

VP-MRK-Regional Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353408

Amount of Each Receipt this Period

23.68

Full Name (Last, First, Middle Initial)

C. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City	State	Zip Code
West Hartford	CT	06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. The Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2211.97

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254824

Amount of Each Receipt this Period

184.62

SUBTOTAL of Receipts This Page (optional)..... ►

231.98

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Matthew E Winter

Mailing Address 70 Ferncliff Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

EVP-APL-Pres. The Allstat

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2396.59

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353434

Amount of Each Receipt this Period

184.62

Full Name (Last, First, Middle Initial)

B. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.74

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254719

Amount of Each Receipt this Period

21.64

Full Name (Last, First, Middle Initial)

C. RONALD W WINTER

Mailing Address 2908 GREY HERON CT.

City

JOHNSBURG

State

IL

Zip Code

60051

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ATO-Leader-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.38

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353327

Amount of Each Receipt this Period

21.64

SUBTOTAL of Receipts This Page (optional)..... ►

227.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City	State	Zip Code
ARLINGTON HTS.	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.85

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254716

Amount of Each Receipt this Period

23.41

Full Name (Last, First, Middle Initial)

B. BRUCE A WOIKE

Mailing Address 1318 N. CHESTNUT AVE.

City	State	Zip Code
ARLINGTON HTS.	IL	60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

FSS-Accounting-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.26

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353324

Amount of Each Receipt this Period

23.41

Full Name (Last, First, Middle Initial)

C. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City	State	Zip Code
Ivanhoe	IL	60060

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

521.49

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254768

Amount of Each Receipt this Period

43.78

SUBTOTAL of Receipts This Page (optional)..... ►

90.60

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. ANGELA K WOIROL

Mailing Address 28616 Sky Crest Dr

City

Ivanhoe

State

IL

Zip Code

60060

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

PO Fld-State Mgr-Top Exp

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.27

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353376

Amount of Each Receipt this Period

43.78

Full Name (Last, First, Middle Initial)

B. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Workforce Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.05

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254590

Amount of Each Receipt this Period

17.95

Full Name (Last, First, Middle Initial)

C. MATTHEW WOJTASZEK

Mailing Address 7 WELLESLEY COURT

City

HAWTHORN WOODS

State

IL

Zip Code

60047

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CE-Workforce Mgmt-Sr Mgr

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353198

Amount of Each Receipt this Period

17.95

SUBTOTAL of Receipts This Page (optional)..... ►

79.68

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 159 OF 170

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City	State	Zip Code
CHICAGO	IL	60660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Reputation-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.34

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254613

Amount of Each Receipt this Period

22.01

Full Name (Last, First, Middle Initial)

B. DAVID E WOOLWINE

Mailing Address 1608 W. ROSEHILL DR

City	State	Zip Code
CHICAGO	IL	60660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

CR-Reputation-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

282.35

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353221

Amount of Each Receipt this Period

22.01

Full Name (Last, First, Middle Initial)

C. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City	State	Zip Code
PARK RIDGE	IL	60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.83

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254697

Amount of Each Receipt this Period

66.75

SUBTOTAL of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

110.77

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. FLOYD M YAGER

Mailing Address 1610 BIRCH LANE

City State Zip Code
 PARK RIDGE IL 60068

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-APL-Chief Data Office

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

857.58

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353305

Amount of Each Receipt this Period

66.75

Full Name (Last, First, Middle Initial)

B. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

441.15

Date of Receipt

06 / 12 / 2015

Transaction ID : A2015-1254760

Amount of Each Receipt this Period

38.06

Full Name (Last, First, Middle Initial)

C. NOEL C YOUNG

Mailing Address 10936 E. Butherus Drive

City State Zip Code
 Scottsdale AZ 85255

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

479.21

Date of Receipt

06 / 26 / 2015

Transaction ID : A2015-1353368

Amount of Each Receipt this Period

38.06

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

142.87

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 161 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Aviation Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.59

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254672

Amount of Each Receipt this Period

22.54

Full Name (Last, First, Middle Initial)

B. PHILLIP C YOUNG

Mailing Address 2181 APPLE HILL LANE

City State Zip Code
BUFFALO GROVE IL 60089

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

ARE-Aviation Leadership-D

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

291.13

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353280

Amount of Each Receipt this Period

22.54

Full Name (Last, First, Middle Initial)

C. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City State Zip Code
ARLINGTON HEIGHTS IL 60004

FEC ID number of contributing federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

539.82

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254695

Amount of Each Receipt this Period

45.42

SUBTOTAL of Receipts This Page (optional)..... ►

90.50

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 170

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. MARY E ZAGORSKI

Mailing Address 2609 N PINE AVE

City	State	Zip Code
ARLINGTON HEIGHTS	IL	60004

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

Encp-Operations-Dir

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353303

Amount of Each Receipt this Period

45.42

Full Name (Last, First, Middle Initial)

B. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City	State	Zip Code
VILLA PARK	IL	60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

259.57

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2015

Transaction ID : A2015-1254731

Amount of Each Receipt this Period

21.74

Full Name (Last, First, Middle Initial)

C. PAUL K ZIGTERMAN

Mailing Address 236 SOUTH RIVERSIDE DRIVE

City	State	Zip Code
VILLA PARK	IL	60181

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Ins Ops Attorney-Top

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

281.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2015

Transaction ID : A2015-1353339

Amount of Each Receipt this Period

21.74

SUBTOTAL of Receipts This Page (optional)..... ►

88.90

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City
AURORA

State Zip Code
IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

929.78

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254753

Amount of Each Receipt this Period

78.34

Full Name (Last, First, Middle Initial)

B. GERALD L ZIMMERMAN JR

Mailing Address 2584 Sutton Lane

City
AURORA

State Zip Code
IL 60502

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

L&R-Gov & Ind Rel Attorne

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1008.12

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 26 / 2015

Transaction ID : A2015-1353361

Amount of Each Receipt this Period

78.34

Full Name (Last, First, Middle Initial)

C. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City
VERNON HILLS

State Zip Code
IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer

Allstate Insurance Company

Occupation

SVP-ABO-Operations Suppor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.22

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 12 / 2015

Transaction ID : A2015-1254782

Amount of Each Receipt this Period

50.48

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

207.16

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 164 OF 170

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. CARLA A ZUNIGA

Mailing Address 2189 N. BEAVER CREEK DRIVE

City State Zip Code
 VERNON HILLS IL 60061

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Allstate Insurance Company SVP-ABO-Operations Suppor

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 26 2015

Transaction ID : A2015-1353390

Amount of Each Receipt this Period

50.48

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

50.48

19408.84

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

Allstate Insurance Company PAC

A. Fifth Third Bank

Mailing Address 346 West Carol Lane

City	State	Zip Code
Elmhurst	IL	60062

Purpose of Disbursement	
Service Charge	

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2015

☐ Primary ☐ General

☒ Other (specify) ▼

Not Applicable

Date of Disbursement

Transaction ID : B577245

Amount of Each Disbursement this Period

105.99

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

105.99

TOTAL This Period (last page this line number only).....

105.99

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 166 OF 170

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Bennet for Colorado

Mailing Address 220 Eye Street NE Suite 110

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

Candidate Name

Michael Bennet

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2015

Transaction ID : B575085

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Bennet for Colorado

Mailing Address 220 Eye Street NE/Suite 110

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

Candidate Name

Michael Bennet

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CO District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576763

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Georgians for Isakson

Mailing Address 900 19th St. NW/8th Floor

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Contribution

Candidate Name

Johnny Isakson

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576773

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 167 OF 170

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Quigley for Congress

Mailing Address 38 Ivy Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Mike Quigley

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 05

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		02		2015

Transaction ID : B575089

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Prairie Political Action Committee

Mailing Address 220 I Street NE/Suite 110

City	State	Zip Code
Washington	DC	20002

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2015
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Not Applicable

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576765

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Robin Kelly for Congress

Mailing Address 372 W. Ontario Street Suite 100

City	State	Zip Code
Chicago	IL	60654

Purpose of Disbursement
Contribution

Candidate Name

Robin Kelly

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 02

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576764

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 168 OF 170

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Kirk for Senate

Mailing Address 55 W. Monroe St. Suite 940

City	State	Zip Code
Chicago	IL	60603

Purpose of Disbursement
Contribution

011

Candidate Name

Mark KirkCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State: IL District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : B576771

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Roskam for Congress

Mailing Address 1006 Pendleton Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement
Contribution

011

Candidate Name

Peter J RoskamCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : B576770

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Donnelly for Indiana

Mailing Address 1433 R St. NW/#2

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Contribution

011

Candidate Name

Joseph S DonnellyCategory/
Type

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2018

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	24	/	2015

Transaction ID : B576774

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 169 OF 170

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Moran for Kansas

Mailing Address P.O. Box 91615

City Washington	State DC	Zip Code 20090
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Jerry MoranOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576767

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Davis for Congress

Mailing Address 17 West Courtland St./Suite 210

City Bel Air	State MD	Zip Code 21014
-----------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Dereck DavisOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576775

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Heller for Senate

Mailing Address 1006 Pendleton Street

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Disbursement
Contribution

Candidate Name

Dean HellerOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2018
☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576772

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 170 OF 170

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Allstate Insurance Company PAC

Full Name (Last, First, Middle Initial)

A. Friends of Pat Toomey

Mailing Address 499 S. Capitol Street SW Suite 420

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Contribution

Candidate Name

Pat Toomey

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

State: PA District:

Disbursement For: 2016
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		24		2015

Transaction ID : B576766

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

19500.00
